BRITISH MEDICAL ASSOCIATION:
SUBSCRIPTIONS FOR 1881.

SUBSCRIPTIONS to the Association for 1881 became due on January 1st. Members of Branches are requested to pay the same to their respective Secretaries. Members of the Association not belonging to Branches, are requested to forward their remittances to the General Secretary, 161A, Strand, London. Post Office Orders should be made payable at the West Central District Office, High Holborn.

The British Medical Journal.

SATURDAY, OCTOBER 15TH, 1881.

ANTIVACCINATION ADVOCATES.

IT is a singular and certainly a significant fact that none of the opponents of vaccination are able to discuss the subject, or the official statistics inseparably connected therewith, without accusing all those who, believing in the beneficent influence of vaccination, have the courage to express it, of *mala fides*. It is with regret that we find Mr. P. A. Taylor, M.P., in his letter to Dr. W. B. Carpenter, C.B., fully adopting the offensive tone which is the characteristic of all antivaccination literature, which invariably makes the preposterous assertion that the vast majority of the educated classes of this and of every other civilised nation who recommend and practise vaccination consist of knaves or fools. It is useless to point out how hopeless and futile must be any argument conducted on such a basis. Mr. P. A. Taylor's opposition to compulsory vaccination is so fully in consonance with his special school of politics, that it need cause no surprise, and may even be said to command a certain modified respect. Now, however, that he has fully adopted not only the views of the most extreme antivaccinationists, but their own particular method and tone of conducting the discussion, he must be content to be judged on the real merits of the cause he has espoused. His pamphlet may, indeed, be in a way claimed as a triumph for the antivaccination party, inasmuch as they have succeeded in getting an M.P. so fully to adopt their matter and method, including their most extravagant assertions, that the little pamphlet in question might have been written by Messrs. Hume-Rothery, Baker, Wheeler, or Gibbs. Mr. P. A. Taylor is in full accord with his party in his treatment of what may be called the strong points of the case for vaccination. It has been stated, on the authority of the entire series of the Registrar-General's Annual Reports, that, notwithstanding the remarkable epidemic of 1871-2, the average rate of mortality from small-pox in England and Wales since vaccination was made compulsory has fallen to less than half the average rate that prevailed in all the years prior to compulsory vaccination for which records exist. Small-pox statistics were given *in extenso* for each year since civil registration was established in 1837, in a table published by Mr. Ernest Hart in his recent pamphlet on *The Truth about Vaccination*. This is an awkward fact for antivaccinationists; and how does Mr. P. A. Taylor meet it? He expresses astonishment at the statistics, so entirely at variance with the figures in his possession; and says that, after some difficulty, he discovered their source in "a work lately published by the ingenious Mr. Ernest Hart, and highly ingenious is the table which he gives"; adding, "It is not difficult to prove from figures any proposition you may have set your heart upon, by judicious selection and unscrupulous comparison". Now, Mr. Taylor does not actually say that Mr. Hart's table is the result of "judicious selection and unscrupulous comparison"; but the obvious inference is left to the ignorant and ill-informed, among whom Mr. Taylor's pamphlet letter is doubtlessly being circulated by the Antivaccination League and its kindred societies and associations. He does, however, add that "it is evident that, by such a process of selection, such calculations are absolutely valueless; much more, indeed, than valueless; for, as a test of the value of vaccination, they are positively and, I fear I must add, intentionally deceptive". Let us briefly state the facts of the case about this so-called "selection of dates", and leave the public to judge whether Mr. P. A. Taylor has honestly met the case.

Civil registration was established in 1837, and certain mortality statistics of England and Wales are available for each of the 43 years 1838-80. It is, however, an unfortunate fact that the causes of death were not abstracted or classified for the four years 1843-46. As regards the causes of death, therefore, and, as a matter of course, as regards the fatal cases of small-pox, we have only official and trustworthy statistics relating to the five years 1838-42, and the 34 years 1847-80. Mortality statistics of small-pox are, therefore, only available for twelve years preceding the operation of compulsory vaccination, namely, 1838-42 and 1847-53; while such statistics are available for the unbroken series of 27 years 1854-80, since the adoption of compulsory vaccination. By adopting, without any selection, other than the necessary exclusion of the four years 1843-46, relating to which no official report of the causes of death have ever been published, the whole available small-pox mortality statistics, we obtain the following results, which Mr. Taylor abuses, and attempts to discredit. The annual rate of mortality in England and Wales from small-pox averaged 420 per million of the population during the 12 years 1838-42 and 1847-53, prior to compulsory vaccination; whereas the annual death-rate from this disease has not exceeded 201.6 per million during the whole unbroken series of 27 years since the adoption of compulsory vaccination. Mr. P. A. Taylor, holding the avowed opinion that the system of vaccination has been "proved a delusive superstition", is open to adopt some other explanation of the marked decline of small-pox fatality since the adoption of compulsory vaccination; but we are quite willing to let public opinion decide whether he is justified in asserting that these calculations are the result of "judicious selection and unscrupulous comparison". Such assertions may have a mischievous effect upon the readers for whom the letter appears to be specially intended; but we are glad to believe that an opposite effect will be produced on intelligent readers. With regard to the four omitted years 1843-46, Mr. Taylor says: "I believe they are known to have been low in small-pox mortality", thus indirectly suggesting that, if the statistics for those years could be added, the calculated rates of mortality in the two periods would be altered in favour of antivaccination. There is good ground, however, for believing 1844 to have been an epidemic year as regards small-pox; and, at any rate in London, it was the most fatal year since the establishment of civil registration in 1837, prior to the epidemic of 1871-2.

In conclusion, we may express astonishment that, in the face of the tone which Mr. P. A. Taylor, in common with other antivaccinationists, adopts, in reference to the medical profession, he should be so anxious to quote medical authorities in support of his view, and that he should be so reckless in his assertions of so-called "accepted medical facts and theories". His statement that "the permanence of vaccine marks is known to be quite uncertain" is a specimen of many similar assertions which abound in his letter.

EXPERIMENTS ON THE ORIGIN OF TUMOURS.

PROFESSOR COHNHEIM'S two volumes of *Lectures on General Pathology* (Berlin, 1877-81) contain a fresh and often brilliant treatment of many parts of the theory of disease. But those of us who are accustomed to a less modern standpoint, and to older books, will be apt to think, in turning the leaves of these volumes, that the use of new methods and the acquisition of new facts has somehow altered the distribution of matter in a pathological text-book, has curtailed the space given to certain very old and obdurate problems, even if the newer subjects get no more than their due. Whether these alterations in proportion, this change in the centre of gravity, which one finds in the new pathology, are merely personal to the individual writer, merely fashionable for the day, cannot be settled by contemporary judgment. But there is abundant evidence that the profession still gives the first place in its thoughts to some of the older questions, to those, indeed, which arise most naturally out of its every-day experience. Professor

Cohnheim's modernised sense of proportion has led him to dismiss tuberculosis in a few pages, and tumours in a single chapter. But it is round those two subjects that the interest excited by Professor Cohnheim's book mostly circles. If there is anything in that work on which more has been written than what the author says about tubercle, it is the theory of tumours.

Tumours, says Cohnheim—all tumours, be it observed—owe their being to the persistence, in various organs and parts of the body, of small residues of embryonic tissue. At the time when the embryonic tissues were passing into their mature forms, there were here and there minute portions which retained the embryonic character. Such embryonic residues might remain in one's body throughout life, and never come to anything. But, in other cases, through one kind of stimulus or another, they will start into active growth; and an overgrowth of embryonic tissue, surrounded, as it would naturally be, on all sides by the ordinary mature tissues, is neither more nor less than a tumour. Such is the theory; and it need hardly be said that it is expounded and illustrated in a most seductive and convincing way. It should be said, on the other hand, that these residues of embryonic tissue, so important for this theory of tumours, have never been seen in their residual quiescent state. The tumours of the body may very well be such embryonic residues grown large; but the existence of the residues themselves is a pure hypothesis. If the residues of embryonic tissue be not such as can be detected by our gross senses, then the hypothesis, like some of the classical hypotheses of physics, may be said to be a legitimate one. If, however, these residues are within the ken of human eyes—and embryonic cells are exceedingly easy to the observer when they are once safely under the cover-slip—then we may look for a proof of their existence at no distant date, or for the downfall of the hypothesis. A recent writer in Virchow's *Archiv* (vol. 85, August 1881), Dr. Leopold, who has spent some of his professional leisure in the working out of the hypothesis in Professor Cohnheim's own laboratory in Leipzig, observes, in the introduction to his paper, that there are two lines of inquiry which may be followed in elucidating the origin of tumours. There is, first, "investigation with the naked eye, and with the microscope, of the parts and organs in the fœtal period and in childhood". That line of inquiry would, doubtless, be for the sake of determining the existence of embryonic residues, and the laws which govern them. But Dr. Leopold perhaps felt that searching the body of a fœtus or of a child for residues of embryonic tissue would be much the same sort of task as looking for a needle in a bundle of hay. He, at any rate, chooses the other line of inquiry—to wit, the experimental. Dr. Leopold is one of the numerous modern instances of a pathological investigator who sees in the experimental method, if not a royal road to discovery, at all events a more attractive occupation for himself than the morphological method of an earlier and a ruder age would afford. But let us see whether Dr. Leopold's well-devised and successfully carried out experiments really enable him to dispense with that somewhat tedious search for the embryonic residues which he (perhaps wisely) declined to institute.

The attempt to grow tumours in the bodies of animals has been tried several times in various countries, but has failed. The plan was to graft under the skin, or otherwise to introduce into the body of an animal, small fragments of a freshly removed tumour (of man or dog). In every case, the grafted fragment simply became encapsuled, as if it were a foreign body. A more successful experiment was devised by Cohnheim and Maas.

They introduced into the jugular vein of an animal pieces of periosteum from the tibia of rabbits, dogs, or fowls; the pieces came to rest in the branches of the pulmonary artery; there they became vascularised, like a simple thrombus, and, within two weeks, produced cartiage and then true bone. But these bone-plates always disappeared after a short time; at the fourth week, only a small rudiment of coarse tissue remained, and at the fifth week, not a single trace. An important step forward was made by Zahn in 1878. He introduced, into the external jugular veins of rabbits, fragments of hyaline cartilage from the costal cartilages of full-grown animals, and no growth followed; but, whenever he took embryonic cartilage (broken up in liquor amnii), the lungs were found, after a time, to contain numerous cartilaginous nodules (situated chiefly near the surface), which were composed of small-celled hyaline cartilage in their periphery, and were calcified at places in their interior. His chief conclusion was that, in general, the embryonic tissues are nearly akin to the pathological, and especially to those that enter into the formation of tumours.

The experiments of Leopold, which are described in the first part of his paper, are an extension of those of Zahn. It was by using embryonic tissues instead of mature tissues that he succeeded. He used a considerable variety of tissues, but he confines his account to his success with embryonic cartilage. A pregnant animal (rabbit) was killed, and the fœtuses placed in warm saline solution, so that their tissues might preserve much of their normal living characters during the somewhat difficult and delicate manipulation that followed. The experiment-animal was also the rabbit, and the experiments, sixty-one in number, were done either on the anterior chamber of the eye (thirty-eight), or on the abdominal cavity (twenty-one), or on the external jugular vein (two). The anterior chamber was opened through the sclerotic, and some fluid let out; a fragment of embryonic cartilage was then thrust in until it came in front of the pupil. The embryonic fragments were introduced into the abdomen through a short vertical cut immediately under the ensiform cartilage. The abdominal experiments read somewhat ambiguously, but those on the anterior chamber led, at least in a certain proportion of cases, to interesting degrees of new growth, which are figured—both as they appeared to the naked eye, and also in their microscopic structure—in the plates that accompany the paper. The implanted fragments of embryonic cartilage took root and grew, till it was in some instances two or three hundred times its original size, and became in the end an enchondromatous nodule. Dr. Leopold, with just satisfaction, says that he "more than once succeeded in artificially producing a real tumour, to wit, an enchondroma, which had enduring powers of living and growing". He adds that the "admissibility of Cohnheim's hypothesis, that tumours depend upon embryonic rudiments, is now made good also by experiment".

What the experiments really show is, that a transplanted fragment of embryonic cartilage will, under the most favourable circumstances, sometimes grow very considerably; and, as it is made to grow in a strange place, the nodule may fairly be called an enchondroma. Leopold's experiments are interesting in themselves, but for Cohnheim's hypothesis they are irrelevant. No one can doubt that quiescent embryonic rudiments of tissue, if they existed, might on occasions take an active growth, and that such overgrowths of embryonic tissue would correspond to some at least of the numerous varieties of tumour. But the point at issue is, whether there are real residues of embryonic tissue scattered throughout the adult body, or whether the mature tissues of the body do not revert sometimes to their embryonic characters. The latter theory is an old one, and it can hardly be said that Professor Cohnheim's theory has superseded it. Further, neither the one theory nor the other is universally applicable to tumours. The sarcomatous class of tumours do indeed often reproduce the embryonic forms of the connective-tissue series. But there is nothing specially embryonic in that other great division of tumours into whose structure epithelium largely enters.

We are asked to call the attention of our readers to the change of address of the office of the General Medical Council, which will now be known as 299, Oxford Street, instead of 315 as heretofore—a change resulting from the renumbering of Oxford Street.

At the first meeting of the Pathological Society, on October 18th, Dr. Stephen Mackenzie will show a case of hæmato-chyluria, and, prior to the meeting, will demonstrate in the freshly drawn blood the *filaria sanguinis hominis*—the first time the living hæmatozoon has been shown at any Society in England.

RECENT numbers of the Russian medical journal, *Vratchebniya Vedomosti*, contain translations of Professor Lister's address on the Catgut Ligature, delivered before the Clinical Society; of Dr. J. S. Billings's address on Modern Medical Literature, delivered before the International Medical Congress; and of M. Pasteur's address on Vaccination in relation to Chicken-Cholera and Splenic Fever.

DR. SYMES THOMPSON announces his Gresham lectures for the autumn season to commence on Tuesday, October 11th. The first lecture is on "Mind and Matter"; the second, "Involuntary and Reflex Nervous Action"; the third, "On the Nerves of Special Sense"; and the fourth, "On the Results of Defective Nervous Action". The lectures are given on successive evenings from the 11th to the 14th inclusive, and commence each evening at six o'clock. They are of a popular character, and open to the public free.

IN his last annual report on the sanitary condition of Newcastle-upon-Tyne, Mr. Armstrong gives a typical instance of the gross carelessness which people evince in exposing themselves to infection. In the instance to which he refers, six cases of scarlet fever (four of them fatal) happened in one house, which was tenemented by four or six families. Even after the funeral of one of the cases, notwithstanding the strong recommendation given to the parents not to allow the attendants at the funeral to meet at the house, an inspector found that "a funeral feast" had been held in the only living room, which was also that where three of the sick children had lived and died.

MEDICAL SOCIETY OF LONDON.

THE Lettsomian Lectures at the Medical Society of London will be delivered on January 9th and 23rd, and February 6th, 1882, by Mr. Hutchinson Royes Bell, Surgeon to King's College Hospital. The subject will be "Diseases of the Testicles and their Coverings". The annual oration will be delivered in May by Dr. Symes Thompson. The subjects for the Fothergillian Gold Medal are: for March 1882, "Whooping-cough: its Pathology and Treatment"; for March 1883, "The Operative Treatment of Pleuritic Effusions". Essays must be sent in before the 1st of the previous November.

SCARLET FEVER AT CARLISLE.

SCARLET FEVER is again prevalent at Carlisle. In a recent report to the Town Council, Dr. Elliot states that there were thirteen patients (all suffering from scarlatina) in the infectious hospital. Although the disease, which is generally prevalent throughout the borough, is reported as of a mild type, two deaths had occurred up to the 4th instant, after illness of only two days' duration. The very mildness of the disease is moreover a source of difficulty, since the patients being, with hardly an exception, children, and being but slightly ill, they are allowed to run about without check, and thus distribute the infection broadcast.

THE VICTORIA CROSS.

THE *London Gazette* contains the announcement, dated War Office, October 4th, that the Queen has been graciously pleased to signify her intention to confer the decoration of the Victoria Cross upon certain officers and soldiers, whose claims have been submitted for Her Majesty's approval, for their conspicuous gallantry during the recent operations in South Africa (Basutoland), and in Afghanistan, as recorded against their names. Among the names is that of "Surgeon-Major Edmund Baron Hartley, Cape Mounted Riflemen, for conspicuous gallantry displayed by him in attending the wounded under fire at the unsuccessful attack on Moirosi's Mountain, in Basutoland, on June 5th, 1879; and for having proceeded into the open ground under a heavy fire, and carried in his arms, from an exposed position, Corporal A. Jones, of the Cape Mounted Riflemen, who was wounded. While conducting him to a place of safety, the corporal was again wounded. The Surgeon-Major then returned, under the severe fire of the enemy, in order to dress the wounds of other men of the storming party." It is not often that the medical profession is thus honoured. Dr. Hartley is a Devonshire man, and the eldest son of Dr. Hartley, of Warwick Square, S.W. After leaving St. George's Hospital, in 1874, he proceeded to South Africa, with the idea of entering on private practice; but war soon broke out, and he was appointed Surgeon to the Cape Mounted Rifles. Subsequently, he was made Principal Medical Officer of the Colonial Forces. He is a member of the British Medical Association.

THE DISADVANTAGES OF COD-LIVER OIL FOR YOUNG CHILDREN.

ACCORDING to the *Revue Médicale*, the Council of Public Health has recently submitted for the sanction of the Academy of Medicine of Paris a report on the disadvantages of cod-liver oil administered to infants and young children. The Commission on the hygiene of infancy has not yet reported its opinion on this subject; but the accusations brought against this medicine by the Council of Hygiene are worth notice. All physicians are aware what disastrous influence is exercised on the health of young infants by defective alimentation, and especially animal nourishment; fatty matters are as little suited to the alimentation of the newly-born infants as albuminoids, excepting always casein, which exists normally in milk, and is found to be perfectly assimilable. In fact, in the first period of life, the juices necessary for emulsifying fatty matters are almost entirely wanting. The liver, in spite of its enormous development in this stage of existence, secretes only a small quantity of bile; and the researches of Langendorf and Zweifel have proved that, in young children, pancreatic juices possess an emulsive power which is almost *nil*, or, at least, very slightly marked. These physiological considerations sufficiently indicate that —far from being profitable to the infant—fatty matters, and especially cod-liver oil, can only injure its health, and gravely compromise the integrity of its digestive functions.

ARMY MEDICAL SCHOOL.

THE winter session of the Army Medical School at Netley was opened on Monday, the 3rd instant; the introductory address being delivered by Professor F. de Chaumont, F.R.S. The class for the session consists of twenty-four surgeons on probation of the Army Medical Service, and ten of the Indian Medical Service, together with one colonial militia surgeon. The thirty-four surgeons on probation were only successful after a keen competition in London for their appointments; sixty-three gentlemen having competed for the twenty-four appointments in the Army Medical Service, and thirty-two for the ten appointments in the Indian Medical Service. The opening was attended, as usual, by the military and medical staffs of the hospital and school, and by visitors from the vicinity of Netley. Professor de Chaumont's address chiefly consisted of an exposition of the results of the sanitary changes that had been effected in the army since the time of the Crimean war, and the influence that some of them had exerted upon civil life. The diminution in the rates of sickness and mortality in the army since the subject of hygiene had attracted special attention was shown, and the particular directions in which further improvements might be expected under extended sanitary arrangements in the future were indicated. We hope that the address, which was listened to with much interest and attention by those who were present at its delivery, may be printed, and so rendered available for general perusal.

DENGUE.

IN an article on Epidemics of Dengue Fever, their Diffusion and Etiology, in the *Glasgow Medical Journal* for September, Dr. James Christie contributes some interesting information regarding the history of this singular epidemic malady. It is usually stated that the first outbreak of the disease occurred in 1824, among a body of troops at Rangoon. It appears, however, that this outbreak at Rangoon was caused by the spread of an epidemic which originated at Zanzibar the previous year. Dr. Christie believes that the disease was conveyed from Zanzibar to the Bombay Presidency in 1824 by native craft which made the voyage during the south-west monsoon, that it prevailed at Calcutta in May, and in Rangoon in June and July. The epidemic

which was observed at St. Thomas, in the West Indies, is also, Dr. Christie thinks, traceable to Zanzibar, the vessel which brought the disease being from the coast of Africa, and probably a slave-ship, which touched at St. Thomas from the Mozambique Channel on a voyage to Cuba. Three epidemics in all are reported as having occurred within the eastern hemisphere: the first (necessarily imperfectly reported), during the years 1779-84; the second, from 1823 to 1829; and the third, from 1870 to 1875; or, if certain recent sporadic appearances are taken into account, from 1870 to 1880. The true derivation of the term dengue, the author informs us, is from the Swahili word *dinga* or *dyenga*, meaning "a sudden cramp-like seizure".

DEATHS FROM ZYMOTIC DISEASES IN LONDON.

THE fatal cases of small-pox in London, which had been 26 and 15 in the two preceding weeks, further declined to 13 last week, and corresponded, the first time for many months past, with the corrected average weekly number in the corresponding week of the last ten years. The 21 fatal cases of measles showed a further increase upon recent weekly numbers, and corresponded with the average. The deaths from scarlet fever were 55, as in the previous week, and were 5 below the average. The 12 deaths referred to diphtheria corresponded with the number in the previous week, and exceeded the average by 2; 2 were recorded in the City, and 2 in Bermondsey. The 38 fatal cases of diarrhœa, of which 33 were of children under five years of age, were 26 below the average. The deaths referred to enteric fever, which had steadily increased from 10 to 48 in the four preceding weeks, were 46 last week, and exceeded the average by 22.

METROPOLITAN WATER-SUPPLY.

DR. FRANKLAND'S report upon the quality of the waters supplied to the metropolis by the various water companies, during September, states that the quality of the Thames water delivered by the five companies drawing their supply from that source was, with the exception of that sent out by the Lambeth Company, inferior to that of the water from the same source delivered in August. Each sample of water, except that furnished by the Chelsea Company, had been efficiently filtered before delivery. The Lea water, supplied by the New River and East London Companies, was superior to the Thames water.

ROYAL SEA-BATHING INFIRMARY.

WE understand that their Royal Highnesses the Prince and Princess of Wales will shortly visit Margate, to open the new wing and chapel attached to the infirmary, upon which Mr. Erasmus Wilson, the President of the Royal College of Surgeons, has expended upwards of £30,000.

THE VITAL STATISTICS OF SALFORD.

IT would be well if more medical officers of health had the enthusiasm and industry of Dr. Tatham of Salford in publishing, at short periods, well arranged and carefully digested tables of the vital statistics of their districts. Not content with an elaborate annual report and quarterly bulletins of the health of Salford, Dr. Tatham issues week by week a tabular statement, giving the population of each district in the borough, and the deaths in each, classified both as regards diseases, ages, and localities. One of these statements, for the week ended the 1st instant, lies before us. It shows the mean temperature during the week to have been 57.8° Fahr., or about half a degree in excess of the mean temperature of last week. The rainfall measured nearly an inch. The general direction of the wind was westerly. A total of 151 births and 73 deaths were registered during the week. Allowing for increase of population, the births exceeded by 17, whilst the deaths were less by 13, as compared with the average numbers recorded in the corresponding week of the previous ten years. The death-rate from all causes, which during the previous four weeks had not exceeded 17.4, rose to 21.4 per 1,000. The 73 deaths included 1 from diphtheria, 3 from whooping-cough, 2 from fever, and 7 from diarrhœa. The death-rate from the seven most familiar infectious diseases was, therefore, equal to 3.8 per 1,000. Fourteen deaths were referred to acute lung-diseases, and 6 to pulmonary consumption. Four inquests were reported: on an infant nine weeks old, found dead in bed; a girl aged 12 years, killed by a street accident; a child 4 years old, poisoned by drinking caustic soda; and a woman aged 70 years, burnt to death.

UNQUALIFIED PRACTICE.

THE letter which we publish in another column from Mr. R. H. S. Carpenter, the indefatigable and public-spirited Honorary Secretary of the Medical Alliance Association, is characteristically full of hard hits and very unmistakably plain language. But it tells a tale which must command respect and admiration, and should ensure attention. The complaint of one of our correspondents was that "a private society"—and Mr. Carpenter says that he refers to the Alliance, and it is not easy to see how he could refer to any other—"prosecutes a few poor fellows who manage branch establishments in the slums of London on behalf of their employers, whilst great offenders who drive their carriages are allowed to go unpunished." This, says Mr. Carpenter, is untrue. "Of the thirty-three prosecutions instituted by the Alliance (including two cases now in the hands of Mr. Pridham), only one such person was proceeded against; the others comprised leading London venereal quacks, registered medical men in good practice, men practising with bogus diplomas from America, Jena, and Giessen, and registered chemists and druggists. All these defendants had ample means for fighting, they all fought well, and some so well that they dragged us into the Court of Appeal. The costs on the side of the Alliance of the prosecutions they instituted in the superior courts ranged from £60 to £90 each. All these costs were paid by the defendants, and they had their own costs to pay in addition, so that it will be seen that our prosecutions were amongst a class of men the very reverse of that alleged by 'X. Y. Z.'" It further appears from Mr. Carpenter's statement that, at the formation of the Alliance, he guaranteed to all the members thereof that not one of them should be responsible for a shilling in payment of law or other costs, beyond their yearly subscriptions of ten shillings and sixpence each. The whole of the prosecutions in the police-courts were instituted in his name, so that he alone became liable for costs; and those in the superior courts were instituted in the name of the Master, Wardens, and Society of Apothecaries, after an assurance to them that they should not be liable for costs in cases of defeat; and, by a special arrangement between the solicitors and himself, even in that event, the members of the Alliance would have been absolutely safe; yet so many of them, forgetting all this, have neglected to pay their subscriptions, in some cases after their own ends have been served, that a sum of about £120 is now due from them to the Alliance; and as the "lawyers" do not, in point of fact, give their services altogether "free, gratis, and for nothing", the Society "would be very glad if these gentlemen would deem themselves in honour bound to forward their subscriptions, which are much wanted for prosecution purposes, to the Treasurer, C. Chaple, Esq., M.D.St.And., 230, Burdett Road, E." This plain unvarnished tale reflects infinite honour on the courageous public spirit of Mr. Carpenter, and records for the first time, we believe, publicly, a part of the record of unflinching devotion to a public cause which has for many years characterised his conduct. This is only a small part, remarkable as it is. For the amount of personal labour given by Mr. Carpenter to the personal investigation of the cases brought before him in his official capacity, his strong good sense in rejecting unworthy appeals, and the acumen and success with which, with infinite labour and expenditure of valuable time, he prepared for legal procedings a long series of cases, have no public record, and are fully known to none but himself, who is the last to speak of them. The fact is, that complainants are much more numerous in this matter than practical supporters; and, but for Mr. Carpenter, Mr. Nelson Hardy, and Mr. G. Brown, and a few practical sympathisers, the Medical Acts would, in respect to the repression of false pretences and sham practitioners, have been pretty nearly a dead letter. One of our correspondents proposed that "a general appeal should be made to the pro

fession for small yearly subscriptions, with the view of forming an association for the purpose of suppressing illegal practice." Mr. Carpenter, however, rejoins on this head: "At the cost of about £70 in postage and printing, the Alliance at various times made such an appeal in England, Ireland, and Scotland, but with barren results as regards the increase of their members, though complaints of illegal practice came to them in profusion. I fear, therefore, that 'Truthful James's' suggestion, if resorted to, would end in failure and expense; but that proposed by you, that every Branch of the British Medical Association should have a Defence Committee, is admirable and practicable; and, seeing that the organisation of that association is complete, a yearly subscription of two shillings and sixpence per member would be sufficient to cover the expenses of all prosecutions, provided they were conducted upon some such principle as that adopted by the Alliance." When this matter was brought under the consideration of the central executive of the Association, a few years since, difficulties presented themselves which prevented any action organised from the centre; but it is quite within the sphere and competency of any branch to add such a committee to its organisation, and to act for its own district when and as such action may seem to be called for. Meantime, societies such as that so energetically represented by Mr. Carpenter seem to deserve very warm and general support.

GRATUITOUS SERVICE TO RATE-SUPPORTED HOSPITALS.

THE Corporation of Sheffield have recently built a Hospital for Infectious Diseases, according to the requirements of the Local Government Board. The cost of erecting this new institution has been defrayed out of the rates, and it will be supported from the same source. The building will shortly be finished and ready for opening; and the question now arises, how it is to be administered. The committee, who have carried out the details, propose that a non-resident medical officer should be appointed at a fixed salary, and that, if necessary, a resident house-physician should be appointed as well. This is, we believe, the usual custom in such cases. But it would appear that the Corporation of Sheffield do not approve of this arrangement, and propose to appoint a resident medical officer and two honorary visiting physicians. This proposal has, we understand, given rise to great dissatisfaction among the medical men in Sheffield, and we cannot be surprised that such is the case. To charitable hospitals our profession is always ready to extend a helping hand. Indeed, many persons think that the principle of gratuitous medical attendance has already been carried too far. But, an infirmary for infectious diseases, erected under the Public Health Act, is in no sense a charity. It is altogether a matter of business, regulated by law, and chargeable on the rates. There is no plea *ad misericordiam* which can be urged upon the medical profession. On the contrary, the services required of the medical attendants are difficult and dangerous, and they are fully entitled to claim adequate remuneration. If the medical men of Sheffield are united in their view of the matter, and if they lay before the Corporation their reasons for the attitude they have assumed, we cannot doubt that their representations will meet with the consideration they deserve.

THE DEVONSHIRE HOSPITAL.

THE Duke of Devonshire opened on Tuesday last the new wing of the Buxton Bath Charity and the Devonshire Hospital, Buxton, amidst many manifestations of rejoicing, the town being generally decorated, and hundreds of visitors arriving by special trains. It had been announced that the Earl of Derby, in his capacity of chairman of the Cotton Districts Convalescent Fund, which had contributed £24,000 to the extension of the hospital (very nearly the whole amount required), would take part in the proceedings, but his lordship was at the last moment unable to attend. The hospital with its lofty and magnificent dome forms one of the principal architectural beauties of Buxton, and was originally founded by the Duke of Devonshire. By the recent extension the buildings have been doubled in size, and it is intended to place the benefits to be derived from drinking the mineral waters of Buxton within the reach of the poorer classes in the cotton districts. His Grace, in performing the opening ceremony, spoke of the beneficial working of the hospital, and expressed his acknowledgments to the chairman and governors of the Cotton Districts Fund for their most liberal grant. The Earl of Redesdale, Lord Edward Cavendish, Sir U. Kay-Shuttleworth, Mr. Hugh Mason, M.P., Mr. Cheetham, M.P., Mr. S. Evans, M.P., and others were present at a luncheon which was subsequently held in the dome, when speeches of a complimentary and congratulatory character were delivered.

MEDICAL SOCIETY OF UNIVERSITY COLLEGE.

THE opening meeting of this society was held on Wednesday evening, and was largely attended. An address was delivered by Dr. Russell Reynolds, consulting physician to University College Hospital, and formerly professor of medicine in the College. The subject of the address was "Specialism in Medicine". It is published at p. 620.

ABSINTHE.

THE consumption of this seductive, health-destroying liqueur appears to be on the increase, and it is now, according to Mr. Winter Blyth, sold in a large number of places in Marylebone, for which parish he is the public analyst and medical officer of health. It seemed to him, therefore, a right and proper thing to chemically examine samples of this liquid, which was done. Absinthe is a yellowish green liqueur, which contains, as a peculiar ingredient, a poisonous oil having a deleterious effect on the nervous system; the oil is called wormwood oil, and is produced in nature by the *Artemisia Absinthium*. Other flavouring oils are always added, such as peppermint, angelica, cloves, cinnamon. and aniseed. The colour is produced by the juice of nettles, spinach, or parsley; or, in other words, is due to the common green "chlorophyll", found in all green plants. Most samples of absinthe contain sugar. The average composition of absinthe is as follows: Absolute alcohol, in 100 parts, 50.00; oil of wormwood, .33; other essential oils, 2.52; sugar, 1.50; chlorophyll, traces; water, 45.65. Alcohol causes drunken sleep; alcohol and absinthe combined produce convulsions. The poor wretches given up to absinthe drinking suffer from a peculiar train of nervous symptoms, the most prominent of which is epilepsy of a remarkably severe character, terminating in softening of the brain and death. The last moments of the absinthe drinker are often truly horrible. M. Voisin records a case in which a man was picked up in the public street in an epileptic fit. He was known to be a large consumer of absinthe. The convulsions lasted until death—four days and four nights. During the last five or six hours of life, the skin of the face became almost black.

DR. NEALE'S "MEDICAL DIGEST".

THE second edition of Dr. Neale's *Medical Digest* is now in course of publication, and those members of the profession who are desirous of procuring a copy should at once sign and return the slips which have been forwarded to them by Dr. Neale by post, since the number of copies printed will be nearly limited to the number of announced subscribers. We call attention to the subject, because the work is one of unusual value to medical readers who desire to retain a key to the current literature of the last thirty years. The labour which Dr. Neale has spent upon it has been largely for public purposes, and with a view rather to the general good than to any individual profit. The new edition will, we believe, contain more than one hundred thousand references to journals, carefully digested, and selected with much judgment; thus affording to any person who desires to collect information upon subject matters of medical interest, either clinical, therapeutical, or scientific, a ready means of obtaining the references to a considerable body of information on the subject from the pens of the best known British writers. Such a digest is an extremely valuable addition to any library, however limited, since it at once indicates to its possessor where to seek for fuller information on the subject, and what has been the nature of the communications made in respect to it to medical journals of past years. In one respect, the first edition is extremely defective, since Dr. Neale did not, in his earlier career, suf-

ficiently appreciate the value of the information contained in the pages of the BRITISH MEDICAL JOURNAL; and the first edition was, therefore, very incomplete. In the present edition, this defect has been remedied for the last eight or nine years; and the references to the abstracts in the *London Medical Record*, for late years at least, have also been added. Therefore the *Digest* is a tolerably near approach to completeness; and its usefulness is as undoubted as is the industry and skill with which it has been compiled.

CHOLERA IN THE EAST.

TELEGRAMS from Constantinople report that the question of taking measures to prevent the extension of cholera which is raging at present in Mecca is causing a good deal of trouble to the Turkish Government. The medical authorities are of opinion that pilgrims should be prevented from going to the holy places, for the epidemic would certainly be intensified by the aggregation of many thousand people in a small town which has no proper accommodation for them, and it would be rapidly disseminated over the whole Mussul man world by the pilgrims returning to their homes. The Sultan, however, is afraid lest fanatical believers should condemn him as an infidel, and political intriguers should make capital out of the religious discontent. It was supposed on Tuesday that a compromise had been found; for the International Commission was allowed to pass a resolution that no ships having pilgrims on board should be cleared for the Red Sea ports, and a Russian steamer was obliged to land the pilgrims whom she was taking to Jeddah. The compromise, however, has since been withdrawn, for the next day a director of a company which is under the control of the Admiralty went to the palace and declared that he had 350 pilgrims waiting impatiently to be transported to their destination. The matter was submitted to the Sultan, and His Majesty replied laconically, "Let them go." They have accordingly been despatched, but it is expected that they will be stopped at Port Said.—According to a Reuter's telegram from Constantinople, the only authentic reports from Mecca are that there were twenty-one deaths from cholera on the 20th of September and five on the 21st. No news has been received of a later date. The Porte has promised to ask the Khedive to facilitate communications between Jedda and Swakin, the last Egyptian telegraph station, in order to obtain more frequent advices. The Sanitary Board has ordered a military cordon to be formed between Gaza and Jerusalem, and the enforcement of ten days' quarantine at Damascus for caravans coming from Mecca. Munif Pasha had promised the Sanitary Board to stop the departure of pilgrims, and, on the strength of this promise, the board recently sought to prevent a Turkish vessel from proceeding to Jeddah, but as the undertaking had been given without the sanction of the Sultan the vessel ultimately received permission to sail. The last news is distinctly unfavourable, and should warn us of the necessity of taking local precautions. At Aden the cases have been of a very bad type, and the deaths almost as numerous as the persons attacked. At Mecca, also, the cholera cases are of a severe type, and, according to communications from Egypt, it is pretty clear that cholera has existed at Mecca for at least a month; for as long ago as that at least 7,000 or 8,000 pilgrims coming from India and stopping at Aden had arrived there. It is very important that the English Resident should be requested to communicate frequently by telegram with our Government here, informing us of the exact facts. The Sultan has sent his First Secretary to the International Council of Health to concert the necessary measures, and the following have been adopted.—*Protective Measures by Sea:* 1. Every ship coming from an Egyptian port on the Mediterranean will be submitted to medical observation for at least twenty-four hours, and to two visits, one on arrival, the other on departure. 2. Every ship coming from India (where the cholera is raging severely at Lahore) and from the Red Sea, whether it has undergone quarantine or not, will be submitted to a quarantine of ten full days in one of the ports of the Empire, provided with a lazaretto. These ports are Beyrouth, Smyrna, Cunea, and Salonica. For further security, no quarantine will be arranged at the Dardanelles, but exclusively at the ports having a lazaretto. At the Dardanelles those vessels belonging to the category mentioned will undergo only a medical visit of twenty-four hours. 3. Every ship, of which the sanitary condition may be bad, or suspected (irrespective of cholera), or having defective hygienic conditions, will be submitted to debarkation of the crew and merchandise in the port with the lazaretto, as well as disinfection at such port; and it will not receive free *pratique* until after a quarantine of ten days, and special permission from the International Council of Health. 4. Every ship, presenting itself at a port of the Turkish Empire, having had or having cholera on board, will be submitted to quarantine, and will not receive free *pratique* until ten days at least after the formal declaration of the disappearance of the disease, and on the express authorisation of the International Council of Health. *Preventive Measures on Land:* 1. Establishment of a cordon, called Syro-Egyptian cordon, from the port of Gaza to the interior; 2. A quarantine of ten full days imposed at a distance of three days' march at least south of Damascus, on every caravan of pilgrims and everything coming from Arabia; 3. The same measure will be applied on the frontiers of Arabia and Mesopotamia to caravans coming from Arabia, as well as in every centre in which the authorities think it necessary to take precautions against anything coming from Arabia; 4. Bassora will submit to quarantine everything that comes to Aden from the Red Sea, Persian Gulf, and in general from all suspected localities. The International Sanitary Council has further adopted resolutions having a like tendency, such as to arrest the movement of pilgrims, and to ensure rapid service of correspondence between Arabia and Constantinople. It has sent to Mecca Dr. Arif-Bey, Vice-President of the Sanitary Council, who studied at Vienna. Egypt, on its side, has taken energetic measures. By a decision of September 27th, the International Council of Alexandria has ordered that, during the period of duration of the epidemic, the territory of Arabia and Egypt will not be allowed free communication with each other. It is also decided to advise Mussulman powers to stop any new departure of pilgrims. The Sanitary Council of Constantinople has very earnestly urged upon the Egyptian Government to depart from its fatal neglect of public hygiene in the capital and ports of the empire more directly exposed to danger. The Governor-General of Algeria has, with the advice of his Committee of Health, prohibited this year Algerian subjects from making the pilgrimage to Mecca. Since the foregoing correspondence was received, telegraphic despatches report that the Sultan has departed from the arrangements advised and made prohibiting further movement of pilgrims to Mecca, and has allowed a boat-load of 250 pilgrims to be despatched on their journey. No doubt, however, these pilgrims will be stopped, for the International Council of Health has fortunately considerable influence with the Egyptian Government, and it is not likely that the Government will take the risk of incurring a further extension of ravages of cholera. It is much to be desired that the Khedive should be informed by the British Consul of the willingness of the Government to support him in these measures of international hygiene against the fatal indecision of the Sultan.—Messrs. Thomas Cook and Son have received the following telegram from their Egyptian representative, dated Cairo, Sunday, October 9th, 11.5 a.m:—"Public health of Egypt perfect. Last report from British Consul at Aden to Sanitary Council, Alexandria, dated October 5th, states that one case and two deaths from cholera on September 27th, since which date no death or fresh case. All reports from Mecca greatly exaggerated. Official report from Mecca by mail."

FEVER IN INDIA.

UMRITSUR is now suffering from a severe fever epidemic. The mortality is 200 to 300 daily. The total deaths for eleven days ended on the 1st of October were 2,265, of which 1,138 were children. The pestilence is believed to be due to the late abnormally heavy rainfall. The Punjab Government is making every endeavour to cope with the disease by sending extra medical aid and opening dispensaries.

A GOOD INVESTMENT.

AT the quarterly meeting of the Court of Directors of the Society for the Relief of Widows and Orphans of Medical Men, held on Wednesday last, it was mentioned by the secretary that a widow had recently died who had been in the constant receipt of relief for herself and her children since the year 1833. Her husband had been a member of the Society for nine years only before his death; thus for a payment of eighteen guineas only, spread over his nine years of membership (two guineas per annum), his widow and children received from the Society the sum of £2,272. No case could better illustrate the advantages of this most excellent Provident Society; and we again would strongly urge upon all members of the profession resident in the metropolis to become members thereof. They will then know that in the event of their death their widows and orphans will always have a moderate competence. A registered medical man resident at any time in London, or within twenty miles of Charing Cross—as one of the house-surgeons of the metropolitan hospitals, for example—can join the society; and he may afterwards live wheresoever he may please, without ceasing to enjoy all the benefits of membership, so long as the annual subscription is paid. Application should be made to the secretary, Mr. J. B. Blackett, at the office of the society, 53, Berners Street, W.

EUREKA.

THE amiable exaggerations with which the records of cure at healing springs, baths, and health-resorts abound, are sufficiently well known; and, as unconscious bias is an element in case-taking which all thoughtful readers take into account, a wholesome scepticism exists which usually discounts somewhat severely—sometimes, no doubt, too severely—the enthusiastic reports of "dwellers on the spot". The enterprising friends of the "Eureka Springs", Missouri, of which the virtues in the treatment of cancer, cataract, and other miscellaneous and malignant bodily troubles have been much vaunted, have resorted to extreme measures to raise the reputation of their spring. Dr. Rumbold of St. Louis, after giving an account of some of these at the St. Louis Medical Society, winds up as follows. "Another case that is reported is that of a man who went to Eureka Springs, and went round to the different places and took his hat off, showing that his head was entirely bald. He drank the water, and stayed there several weeks; and the hair commenced to come out, and before long a good crop of red hair had appeared. A few weeks afterwards, the man got tight in Springfield, and told how he had been paid five dollars a day to have his head shaved clean and stay long enough to have the hair grow out." It would not be easy to beat this novel element in the manufacture of the history of balneology.

CENTENARIANS OF ANTIQUITY.

SOLON, Thales, Pittacus, Epimenides, four of the seven sages of Greece, exceeded a century in age, according to Lucian, who fixes the date of their deaths at about 600 years B.C. Epinides, poet and historian, died at the age of 154 years, according to Pliny. Aristarchus, a tragic poet of Tegæa in Arcadia, died a century old, about the year 460 B.C. The comic poet Cratinus of Athens died at 93 years of age, in the year 431 B.C. According to Valerius Maximus, Sophocles composed *Œdipus* when he was nearly 100 years old, about 405 B.C. The satirical poet Democritus died at the age of 109, in the year 361 B.C. Gorgias of Leontium died at 108, in the year 400 B.C. The great orator Isocrates is said to have starved himself at 99 years of age, about the year 338 B.C. Hippocrates, the father of medicine, died at the same age, 361 years B.C. The philosopher Theophrastus died at 107, about the year 288 B.C. Cleanthes of Epirus, disciple of Zeno, died at 100, about the year 240 B.C. The historian Hieronymus of Rhodes died at the age of 104, about 254 B.C. The immortal Galen died almost a centenarian, like his great predecessor Hippocrates, in the year 193. The philosopher Demonax of Crete starved himself to death at 100 years of age, in the reign of Adrian, 120 A.D. The Romans have also their centenarians, but their dates are often unrecorded. Juvenal is said to have died a centenarian, A.D. 120. Terentius Varro of Atax died at 98, A.D. 28. Quintius Fabius Maximus died a centenarian about 107 B.C. Perennius Tutus died at 111 years of age, at Cornelia, in the year 117. It appears from this list, as collected from the *Lyon Médical*, that, in ancient times, some people had already acquired a habit of allowing themselves to die of hunger; and Dr. Tanner, with his long fast, is only a plagiarist. The ancients had, however, as a justification, their great age; and they might reasonably think that they had lived long enough.

SCOTLAND.

THOMSON LECTURES IN ABERDEEN.

AT a recent meeting of the Senatus of the Free Church College, Professor Alexander Macalister was appointed (subject to the approval of the College Committee) Thomson Lecturer in Natural Science for the session 1881-2. Professor Macalister holds the Chair of Anatomy in Trinity College, Dublin; and, from his well-known attainments, a very interesting course of lectures may be anticipated. Zoology will be the special subject of which he will treat.

COMBE LECTURES.

THE three Combe Lecturers have each commenced the winter course of lectures. Dr. Andrew Wilson delivered the first of the Edinburgh course in the United Presbyterian Synod Hall there last Thursday. In Glasgow, Professor McKendrick delivered the first of the Glasgow course in the Glasgow Young Men's Christian Association Hall; while, on Tuesday, October 4th, Professor Stirling delivered the first of the Northern Course of Lectures in the Assembly Hall, Montrose. In connection with this subject of public lectures, it may be maintained that the syllabus just published of the Popular Health-Lectures for the Industrial Classes, to be delivered by members of the profession in Edinburgh, is an exceedingly promising and attractive one.

HEALTH-LECTURES IN GLASGOW.

THIS series of health-lectures, to which reference has already been made in the JOURNAL, commenced on the evening of the 10th instant. The lectures, which are to be given by gentlemen well qualified to treat of the subjects selected, are to be of a popular character, and specially adapted to the improvement of the working classes. Indirectly, they are in connection with the "Combe Trust", which was a sum of money left by the late Mr. Combe at his death, to accumulate till it was sufficient to secure the services of qualified lecturers for regular courses of health-lectures in the larger towns of Scotland. This year, Glasgow has been selected as one of the towns; and, as the admission-ticket to the present course costs a mere trifle, it is to be hoped that the working classes will avail themselves of the advantage of hearing the important matter of health discussed by competent authorities. Professor McKendrick gave the opening lecture of the series, his subject being, "Bodily Waste and Repair". The lecture, which was well illustrated by diagrams and experiments, was very favourably received by the large audience present.

MEDICO-CHIRURGICAL SOCIETY OF GLASGOW.

THIS Society met in the Faculty Hall, 242, St. Vincent Street, on Friday, October 7th. The following office-bearers were elected. *President*—Dr. George Buchanan; *Vice-Presidents*—Dr. J. B. Russell, Dr. Peter Stewart; *Council*—Dr. Bruce Goff, Dr. George Willis, Dr. George Mather, Dr. H. C. Cameron, Dr. Robert Forrest, Dr. Lapraik, Dr. D. Maclean, Dr. J. C. Woodburn; *Secretaries*—Dr. Joseph Coats, Dr. W. L. Reid; *Treasurer*—Dr. Hugh Thomson. The President gave an address, in which he referred to the changes in the medical profession and the medical schools of Glasgow within comparatively recent times. The subject of vivisection having been introduced, the following resolution was put from the chair, and carried unanimously: "That it is the opinion of this Society that experiments on animals are necessary for the advance of medicine, and that no obstacles should be

thrown in the way of competent men performing such experiments. Further, that this Society strongly deprecates the infliction of unnecessary pain, and would support any law which would check this without obstructing competent observers, as the present law does." A committee was afterwards appointed to carry out the resolution in co-operation with similar committees from the faculty and other bodies.

ABERDEEN UNIVERSITY RECTORIAL ELECTION.

WITH regard to the nominees for the Rectorship in this University, we believe that it is premature to prophesy who the gentlemen may be who will be nominated. Sir James Paget has not given his final decision, nor has Dr. Bain, as far as we can learn. When the students assemble on the 26th current, active campaigning will be begun. Neither Sir James nor Dr. Bain desire that the issue—should they consent to be nominated—should be based on political grounds. The election will take place on Saturday, November 12th, and will thus be over at an early period of the session, so as to admit of the students applying themselves to work.

EPIDEMIC OF SCARLET FEVER IN BROXBURN.

SCARLET fever has been very prevalent for some time back amongst the children in this village; and a good many of the cases have proved fatal, as many as fourteen deaths occurring in one week. The number of cases in the district at present amounts to about ninety. Bad ventilation and overcrowding are held to be some of the chief factors in the occurrence and continuance of the epidemic.

GLASGOW SOUTHERN MEDICAL SOCIETY.

AT the thirty-eighth annual meeting of this society, held on the 6th instant, the following gentlemen were appointed office-bearers for the session 1881-1882: Neil Carmichael, M.D., President; J. Barras, M.D., Vice-President; E. Macmillan, L.R.C.S.E., Treasurer; A. Turnbull-Smith, M.B., and Robert Pollok, M.B., Secretaries; and Archibald Johnstone, M.B., Seal-keeper.

HOSPITAL APPOINTMENTS, EDINBURGH.

MR. D. J. HAMILTON, M.B., F.R.C.S., Edinburgh, has been appointed Pathologist to the Royal Hospital for Sick Children, Edinburgh, in place of Professor Saunders, deceased. The directors of that institution have also appointed Mr. R. M. Johnston, M.B., to be resident physician in the hospital, succeeding Mr. J. W. B. Hodsdon, M.B., who retires. For the Royal Maternity and Simpson Memorial Hospital, Mr. James Hewitson, M.B., and Mr. John Waugh, M.A., M.B., succeed Mr. R. Barclay Thomson, M.B., and Mr. Roger Kirkpatrick, M.B., as house-surgeons for the ensuing three months, while, for the same time, Professor Simpson succeeds Dr. Halliday Croom as medical officer on duty.

ROYAL INFIRMARY, EDINBURGH.

THE amount of money paid to the Royal Infirmary, Edinburgh, during the financial year just closed, as legacies and donations, in sums of £100 and upwards, reaches a total of £7,299 19s. 6d. The individual donations vary from £100 to £2,250 (received from the estate of a deceased clergyman), there being two of £1,000, one of £500, and three of over £300. The managers state that, while they feel deeply grateful for these legacies and donations, a considerable sum is still required to enable them to clear the debt remaining on the new buildings.

SICK CHILDREN'S HOSPITAL, EDINBURGH.

DURING September, 809 cases were treated at the Royal Hospital for Sick Children, Edinburgh, of whom 688 were dispensary and out-door cases, 40 were admitted as in-door cases during the month, while there were 56 inmates of the hospital at the beginning of the month.

THE REGISTRAR-GENERAL'S RETURNS.

FROM the returns of the Registrar-General for the week ending October 1st, it appears that the death-rate in the eight principal towns during the week was 17.4 per thousand of the estimated population. This rate is 1.4 below that of the corresponding week of last year, and 0.8 below that of the previous week of the present year. The lowest mortality was recorded in Aberdeen—viz., 10.8 per thousand; and the highest in Perth—viz., 26.1 per thousand. The mortality from the seven most familiar zymotic diseases was at the rate of 3.7 per thousand, or 0.3 above the rate for the last week. Acute diseases of the chest caused 83 deaths, or 5 more than the number recorded last week. The mean temperature was 54.5, being 1.4 below that of the corresponding week of last year.

THE POISONING WITH RABBIT AT NAIRNSIDE.

IT may be remembered that, a month ago, there appeared in the JOURNAL a notice of a case of poisoning of several persons from partaking of some rabbit-soup, and that one of those persons died from the effects of it. The matter was remitted to Dr. Littlejohn, Edinburgh, as an expert, and the necessary evidence sent to him. It appeared that the soup made from the rabbit contained curry, and, as was supposed, parsley. Dr. Littlejohn, in his report, states that the symptoms pointed to poisoning by a narcotic, and not a pure irritant, and were similar to those produced by certain members of the *Umbelliferæ*. Had some "fools' parsley", in mistake for ordinary parsley, been accidentally introduced into the soup, he is of opinion that it would be sufficient to account for the death of the cook Macdonald, and for the symptoms of poisoning exhibited by others who partook of the same material.

THE DEATH OF DR. JOSEPH BROWN.

AT a meeting of the Fife and Kinross District Board of Lunacy, held on October 4th, an expression of deep regret for the melancholy death of Dr. Joseph Brown was entered on the minutes, and a copy was ordered to be sent to the nearest relative. A resolution was arrived at not to advertise for candidates for the vacant post, on account of the great trouble such a plan would give to every member of the Board. It was determined to ask Dr. Fraser, Deputy Commissioner in Lunacy, to nominate a candidate for the approval of the District Board. Now, although Dr. Fraser was formerly Superintendent of the Fife Asylum, it certainly appears an extraordinary step to ask him, now that he is a Government official, to perform such an important and delicate duty. It is a method of procedure which will not meet with the approbation of the medical profession, in which body there is a general consensus of opinion that all such appointments should be perfectly open to competition, and that official nomineeism is distinctly objectionable. It is to be hoped that the District Board of Fife and Kinross will reconsider its resolution, and act more in accordance with its duty.

COMBE LECTURES ON PHYSIOLOGY IN THE NORTH OF SCOTLAND.

PROFESSOR STIRLING, of Aberdeen University, commenced the above course in Montrose on October 4th. There was a large attendance, and the lecturer was listened to throughout with the utmost attention. Dr. Stirling gave a short account of the object of this course—viz.: to convey instruction of a sound and practical, yet popular, nature regarding the general structure and functions of the human body, and the bearing of such knowledge on the preservation of health. A short account of the life-work of George Combe was given, in which special attention was directed to Combe's views on the subject of education—views which are now regarded as just and right, although they were stoutly opposed during Combe's lifetime. The general build of the body was next described; and the chief facts about matter and energy were illustrated by a number of simple but striking experiments. The indestructibility of matter and energy, and the transformation of one mode of motion into another, were brought home to the audience by experiments. The general type or plan of construction of the body was then dwelt upon; and the lecture was brought to a close by a short description of the skeleton. Several simple, yet ingenious, models were used to illustrate certain parts of the bony framework. The use of physiological and anatomical knowledge, as bearing on disease, was illustrated by a reference to the case of President Garfield. The pain of which he complained in his right foot, shortly after being wounded,

was clearly due to some injury done to the nerves when the first lumbar vertebra was fractured by the bullet. A special feature of these lectures is the syllabus which Dr. Stirling has prepared, and which, through the liberality of the Combe trustees, is given to each holder of a ticket for the course of lectures. The syllabus consists of twelve pages of printed matter, giving an outline of each lecture; and, in addition, there are ten small quarto lithographed plates of the chief diagrams and drawings which are used by the lecturer. Each member of the audience has a pictorial guide to the course; and, further, an outline of the whole subject. In this way, every one, by a reference to the syllabus, can see exactly what the lecturer is talking about. This is decidedly a great step in advance, and will ensure that these lectures shall be "popular" in the best sense of the term; and that they will not be merely a means of passing an agreeable hour, but that there shall be actual teaching of the leading facts of physiological science to large audiences. This is an extension of the principle of giving lithographic slips to students, which is largely practised in Aberdeen University, and which is highly appreciated by the students, as it lightens the work of note-taking, and ensures that each student has a permanent record of the chief facts of each day's lecture.

ABERDEEN ROYAL INFIRMARY.

AT a meeting of the Committee of Management of the Aberdeen Royal Infirmary, held on the 7th instant, a proposal, submitted by Dr. Alex. Ogston, for a change in the present system of the clinical instruction of students at the hospital, came up for consideration. At present, the clinical lectures are delivered by the various members of the hospital staff, in rotation; and Dr. Ogston's proposal was to the effect, that each of the staff should be at liberty to give a course of lectures all through the college session. The committee, we understand, did not see their way to approve of the proposal.

IRELAND.

LORD WAVENEY opened, a few days ago, a new cottage hospital at Ballymena, to contain seven beds. Towards its support, donations amounting to £261, and annual subscriptions amounting to £124, have been received.

THE annual dinner of the Ulster Medical Society was held last week, when Sir William Mac Cormac of London was entertained by the members at the Imperial Hotel, Belfast. The toasts included the guest of the evening, the "British Medical Association", and the "Ulster Medical Society".

ON the 7th instant, a grand ball was held at the Assembly Rooms, Cork, on behalf of the funds of the Cork Lying-in Hospital. The ball-room was handsomely decorated, and great credit is due to the committee for their efforts in producing so successful a result.

ILLNESS OF DR. HAYDEN.

WE regret to learn that Dr. Hayden, President of the Dublin Branch, has been seriously ill for the last fortnight. At a meeting of the Senate of the Royal University, on the 1st instant, he got a chill, from sitting in a draught, which was followed the same evening by a rigor. Symptoms of double pneumonia rapidly supervened, and for many days his condition was most critical. During the present week, he has had a favourable change; and we but re-echo the sentiments of his numerous friends in earnestly wishing for his speedy restoration to health.

BANDON DISPENSARY.

AT a meeting of the Bandon Dispensary Committee held last week, a letter was received from Dr. Toole, informing the committee that debility, consequent on advanced age, rendered him incapable of performing the duties of medical officer of the district, and tendering his resignation. The following resolution was unanimously adopted: "That we beg to express our regret at the resignation of Dr. Toole (through infirmity) as physician to the dispensary of the Bandon District, and who, for a period of thirteen years, discharged his duties with ability, punctuality, and kindness to the sick poor. The Local Government Inspector frequently testified to the accuracy with which the dispensary books were kept; and we desire that a copy of this resolution be sent to Dr. Toole."

ULSTER HOSPITAL FOR SICK CHILDREN.

THE annual meeting of the friends of this institution was held in the Clarence Place Hall, Belfast, on the 5th instant, the chair being occupied by Sir John Savage, J.P. The committee, in their report, stated that there had been steady progress in each department of the hospital during the past year, and that the working of the institution had been very satisfactory. During the twelve months ending August 1st, there were 5,396 new cases, and 3,606 old, making a total of 9,002 sufferers who received medical relief, while the number treated as intern patients amounted to 130. The nursing arrangements appear to be most satisfactory, and Dr. Whitla, one of the medical staff, in reference to this matter, states that "the nursing and internal management of the hospital is perfect in every detail, and will compare favourably with that of any similar institution of its size in the kingdom. The committee report that His Excellency Earl Cowper, Lord-Lieutenant of Ireland, has signified his intention to become a patron of the hospital. In consequence of an expenditure for hospital requisites, a small debt has been incurred, and, in order to remove this, it has been decided to hold a bazaar early in November, when it is hoped that a fund will be raised sufficient for the purpose, and to leave a sum in hand to meet any extra expenses that may arise. The report was adopted, and a vote of thanks was accorded to Drs. Esler and Whitla for their services to the hospital during the year.

HEALTH OF BELFAST.

DURING the month of September, 13 cases of fever and 5 of small-pox were removed to the hospital for contagious diseases, and the usual sanitary precautions taken to prevent the spread of these diseases. In the four weeks ending 24th ultimo, 41 deaths took place from zymotic diseases, including 3 from small-pox, and 27 from diarrhœa. Phthisis caused 48 deaths, and diseases of the respiratory organs 47, making a total of 95 deaths from chest-affections. The total births registered amounted to 535, and the deaths to 294, showing a natural increase of 241. The average death-rate for September was 18.3; from lung-affections, 6.0; and from zymotic diseases, 2.5, of which diarrhœa caused more than half. Zymotic diseases did not prevail to any great extent, but phthisis, bronchitis, and pneumonia, still show a high death-rate, viz., 6.0 per 1,000, or one-third of the entire deaths. Typhus fever, which recently appeared in Belfast after a considerable absence, has not spread, and small-pox has not prevailed, as only three cases were reported in the first two weeks of the month, and then 2 cases after an interval of twelve days, which were of a modified type.

SANITARY WORKS IN IRELAND.

IT appears from the recently published report of the Public Works Loan Commissioners that, under the Labourers' Dwellings in Towns Act (Ireland), seventeen loans, amounting to £28,870, were granted to borrowers during 1880, as against £31,858 granted to nineteen borrowers in the previous year. The expenditure of this amount, when fully completed, will have aided in the erection of 302 dwellings. The quantity of land thoroughly drained under the Public Works' Act (Ireland) since the commencement in 1847, to the 31st March in this year, was 274,827 acres, at an average cost of £7 per acre. Of this quantity, 5,944 acres were drained during the year 1880-81. In Ireland, sanitary works have been proceeded with to a larger extent than in any former period, an impetus having been given to them by the desire on the part of local authorities to afford as much employment as possible during a period of much general distress. Loans amounting to £218,558 were granted by the Commissioners of Public Works for the execution of these works.

ASSOCIATION FOR THE PROMOTION OF SOCIAL SCIENCE.

THE following papers, among others, were read in the Health Department at the recent meeting of the Association in Dublin.

State Supervision of Hospitals.—A paper on this subject was read by MR. H. C. BURDETT. He said that a review of the discussions and circumstances relating to the management of hospitals and kindred institutions in the United Kingdom during the past five years led to the conclusion that hospital managers are becoming alive to the fact that the system heretofore in force cannot much longer continue unaltered and unreformed. During this period, no fewer than four influential deputations have sought interviews with the Home Secretary, with the object, in each case, of obtaining a Royal Commission of investigation into the subject. These deputations have represented all hospital interests, and Mr. Burdett thought there could be small doubt that the appointment of such a Commission would secure the adoption of adequate measures based upon the reliable data which would then be forthcoming.

He placed first amongst the circumstances which have produced so active and unanimous a desire for inquiry the many anomalies of the present system of hospital administration. In the metropolis especially, the hospital accommodation is imperfectly distributed, and in many districts is altogether inadequate.

The administration of the hospitals as at present conducted is so uncertain and unsatisfactory, that inquiry is needed to secure amelioration in the interests of the poor. To facilitate a right judgment, and to furnish reliable data, Mr. Burdett had prepared a variety of elaborate and carefully compiled statistical tables, based upon the published reports and statements of the various institutions. These showed that the cost of management in sixty-one general hospitals varies from 2½ per cent. at Cork, to 27½ per cent. at the Metropolitan Free Hospital; the cost per patient per week from 9s. 4d. at the Cork County Hospital, to £3 0s. 4d. at the Leeds General Infirmary. A difference of 25 per cent. in the cost of management, and of nearly 700 per cent. in the cost of maintaining the patients, would alone warrant the appointment of a Commission. The special hospitals show equally startling discrepancies.

As to the distribution of hospital accommodation, nearly nine-tenths of the bed-accommodation in the London hospitals is situated within a radius of a mile and a half from Charing Cross. The population of London resident within the metropolitan area, and exclusive of the large number of persons who are annually sent to London for hospital treatment, cannot be less than four and a half millions, one-third of which number is annually relieved at the London hospitals. Out of a total of 4,579 beds for the whole metropolis, 3,486 are provided by the hospitals situated in the narrow area above specified.

At present, North London, with a population of nearly 1,000,000, possesses but one hospital, the Great Northern, with thirty-three beds; the East End, with its river-side and manufacturing population of 1,100,000, is dependent upon the London Hospital with 790 beds, and the Metropolitan Free Hospital with twenty beds, both of which are inconveniently situated for a large proportion of the inhabitants. The West End, with a population of 950,000, has but two hospitals—St. Mary's with 190, and the West London with 60 beds respectively. A population of nearly one and a half millions on the Surrey side of the Thames has to rely upon Guy's with 700 beds, and St. Thomas's with 400 available beds, both of which, though largely endowed, are situated miles away from a portion of the district to the wants of which they nominally minister.

The unsatisfactory condition of the present out-patient system, and especially of that in force at the large metropolitan hospitals, demands reform. At the present time, more than a million people, or one in three, receive relief at the London hospitals; in Liverpool, one in two; and in Birmingham, one in three and a half of the whole population at present in receipt of free medical relief. About 600,000 people come annually to thirteen of the best hospitals in London for medical advice and assistance, at an annual cost of £15,000 in medicine alone. The average attendance of these patients is from three to seven hours before each can be attended to; and the rush is so extreme, that the medical advice they receive is almost perfunctory. Prince Leopold had well said that the time and attention of eminent physicians and surgeons are generously placed at the service of the poor, but unfortunately eminent persons have no more time than persons who are not eminent; and when a million out-door patients apply at the London hospitals in one year, it becomes rather a delicate arithmetical problem how many seconds can be bestowed on each of them.

It is desirable that every hospital and medical institution intended for the relief of the suffering poor should be administered by a board of management, subject to periodical election by the governors, upon which board the medical staff of the charity should be adequately represented.

An authoritative supervision over the administration and a public audit of the accounts of all such institutions is needed to secure a right distribution of medical relief, and a more economical expenditure of the funds entrusted to the boards of management. A public audit is absolutely necessary to check extravagance and to protect the public, which has at present but little or no voice in restraining reckless mismanagement. The donors of charitable funds and the recipients of the benefits arising therefrom have at present but little guarantee that strict economy is practised or the greatest possible good achieved. An authoritative supervision would prevent foolish squandering, the occupation of unhealthy and unsuitable buildings as hospitals, and it would also promote good feeling between the hospital authorities and the medical staff.

The absence of organisation and combination amongst the medical institutions throughout the country materially lessens their usefulness. This is strongly enforced by the enormous and needless difference in the cost of management and maintenance of different hospitals. The absence of this combination or co-operation leads to lamentable extravagance and an enormous waste of money, owing to the repetition of an expenditure in the management of very many charities.

In the administration of the wards, so far as it affects the treatment of the patients, and especially in the management of the nursing arrangements, the medical staff should have an authoritative voice. Recent events have shown the public and the medical profession to be in substantial accord on this point. No one who knows anything about the management of a hospital has any doubt on the subject. Yet the old system not only attempts, as in the case of Guy's Hospital, to openly defy public and professional opinion in this matter, but its audacity leads it to brave the interference of a court of law by studiously excluding all medical men from the governing body, in distinct contravention of the original and expressed views and intentions of the founder himself. No wonder that the nurse has been encouraged here and elsewhere to neglect her twofold duty towards the doctor, viz., *(a)* to strictly carry out his directions as to the treatment of the patient; *(b)* to observe the patient's condition, to notice the changes in it, and what she may either know or suppose to be the effects of the treatment, so as to enable her to give a short, clear, and correct account to the doctor at each visit. It really resolves itself into the question, Is the patient for the nurse, or the nurse for the patient? If the former is to be the principle upon which modern hospital nursing is to be conducted for the future, hospitals must soon cease to exist, because patients will cease to seek admission to their wards.

Unfortunately, in the majority of the large hospitals the nursing arrangements are under the control of a matron, unaided by a nursing committee, and only indirectly, if at all, assisted by those alone qualified to direct, viz., the medical staff. Out of twenty-two hospitals having medical schools, there are but seven where this important department is superintended by a nursing committee upon which the medical element is represented.

The importance of medical education, and the adequate training of the members of the medical profession, require an intelligent recognition of the relation of the hospitals to their medical schools, to insure an improvement in such relations. Inasmuch as the education of medical men is a matter of vast importance to the State, it should be as complete and practical as the science of the day permits. It is, therefore, an imperative necessity that the relationships existing between the large hospitals and their medical schools should be those best calculated to promote this end. Yet, notwithstanding this, medical education in this country almost entirely depends upon private speculation and haphazard enterprises whose success rests upon the preservation of a harmonious relationship between corporations with apparently separate aims. Should this harmony between hospital and school at any time be ruptured, the existence of the school becomes at once imperilled, thereby seriously endangering the interests of the public. Granted that the obligations conferred upon the schools by their respective hospitals are great, yet those bestowed on the hospitals by the schools are vastly greater.

The consideration of these points is, however, almost entirely neglected by those who ought to foster their growth. So little do the governors recognise their responsibilities, that in most schools the buildings are inadequate for the purpose, in consequence of being mainly, if not altogether, erected at the expense of the teachers, who are merely tenants at will. With adequate representation of the medical staff upon the boards of management of the hospital, and of the governors upon the school committees, an intimate acquaintance with

the practical requirements of these joint institutions would secure the highest efficiency in the administration of the whole.

During recent years, the Metropolitan Asylums Board has built and opened some of the most extensive and complete of modern hospitals. These splendid Poor-law infirmaries have provided accommodation for nearly ten thousand in-patients. They are placed in charge of paid resident medical officers, whose clerical duties, under the present system, are so onerous, that they have far too little time to devote to the treatment of the cases entrusted to their care. These infirmaries afford a magnificent field for the treatment and investigation of disease, for pathological research, and for medical education. A Royal Commission would consider if any and what alterations were necessary in the management of these splendid Poor-law infirmaries; how far, if at all, they could be made available in a re-arrangement of the hospital accommodation of the metropolis; and whether or not it might be desirable to appoint visiting physicians and surgeons, assisted by efficient juniors, and aided by a staff of clinical clerks, dressers, sisters, and nurses, to relieve the resident staff by undertaking the treatment of some or all of the cases.

Mr. Burdett left it for the Congress to decide whether or no it was desirable that our hospitals should be placed in some sense or other under State supervision. He claimed to have produced enough evidence to show that the time was ripe for an exhaustive inquiry by a Royal or other Commission. The present Home Secretary had already expressed himself favourably disposed towards such an investigation, and there was good reason to believe he might be induced to grant an inquiry at the instigation of the Social Science Association. In the writer's opinion, whether State control be ultimately decided upon or not, it was undoubtedly desirable that an annual conference of the representatives of all the hospitals of this country should take place, because it would possess great economical advantages, and be likely to prove useful and attractive to the charitable public, and so doubly beneficial in the end to all medical institutions. He advocated the establishment of a central store for the distribution of all articles of consumption, and of a central office for the receipt of subscriptions to all hospitals.

The appointment of a controlling authority, endowed with adequate powers to sanction, restrict, or prohibit the erection of a new, or the extension of an already existing hospital or dispensary was, he thought, urgently called for.

Nearly everywhere the building mania seems to have blinded hospital managers, so that extravagances, going far beyond the requirements of the districts in which the hospitals are situated, and entailing half-empty wards and increased cost of maintenance, are becoming the rule and not the exception. The indiscriminate institution of special hospitals and dispensaries is productive of evil, and a controlling power is urgently called for to prevent the multiplication of so-called charities, which oftentimes, springing from unworthy motives, decoy charitable funds from legitimate channels. Such examples of ill-advised expenditure reflect directly or indirectly great injury upon the poor, for whose benefit the large sums involved were originally intended.

The social and public aspects of this great question of the right government of our hospitals alone demand an immediate investigation. When something like one million and a quarter of the population of London annually seek and receive gratuitous medical relief, and when the whole wage-receiving class in the metropolis cannot be estimated at more than 1,400,000, there is enough to warrant an independent inquiry into the whole question by a Royal Commission. This feeling is rapidly spreading, and is making itself felt in the diminished incomes which the hospitals are now receiving from voluntary sources. This difficulty will certainly increase as the public become impressed with the knowledge that it is not the sick poor at all who are being benefited, but nearly the whole wage-receiving and industrial classes, a large proportion of whom are well-paid artisans.

A paper by Dr. PROSPÈRE DE PIETRA SANTA of Paris, on Hospital Administration in Paris and in London, was also read, as bearing on the special subject. The Assistance Publique in France, the author said, is organised by law, and placed under the special supervision of the Minister of the Interior; a Director, invested with every requisite authority, being appointed by the Minister. It constitutes a mixed organisation, which resembles the voluntary assistance of England, as well as the communal assistance, taking advantage of both their good points, without being affected by those dangers which English legislation has created by the Poor-law rates.

In the discussion which followed on both papers, several speakers took part. The Rev. Dr. Haughton, Surgeon Myers (Coldstream Guards), and Miss Downing were opposed to State supervision; and Drs. Jacob, C. A. Cameron, Grimshaw, and Mr. Collins approved of it. Finally, the following resolution was adopted.

"That, in the opinion of this section, the council of the association should take measures to promote and procure an inquiry with the view of securing independent supervision over all public hospitals."

Legislation for Habitual Drunkards.—Dr. NORMAN KERR of London read a paper on the Present State of Legislative and other Treatment for the Habitual Drunkard, dealing with the subject under the following heads: History of the Act, 1879; Hindrances to the Success of the Act; the Dalrymple Home; Pauper Dipsomaniacs; Success of Voluntary Female Homes; Need for the Governmental Inspection; Reply to Recent Criticism. On the subject of Pauper Dipsomaniacs, Dr. Kerr said: "The British Medical Association, desirous to provide an opportunity to dipsomaniac paupers to avail themselves of the provisions of the Act with a view to reclamation, recently communicated with the Local Government Board and with Boards of Guardians throughout the kingdom. No definite promise to do anything was elicited from the former. As regards the appeal to the Guardians, while some Boards were desirous to have the power, if they should think fit to exercise it, to pay for the detention of pauper habitual drunkards in Retreats, the majority of the Boards did not wish for any power to enable them to add to the rates for the poor". He concluded with the following appeal on behalf of the Dalrymple Home: "At present there is ample accommodation at excellent private establishments for the wealthy dipsomaniac, but for the habitual drunkard in moderate circumstances, or in a state of destitution, there is no provision whatever. Magistrates, clergymen, and medical men are constantly calling for inebriate retreats, which they could speedily fill with suitable inmates. Shall the appeal of men so well qualified to form a sound judgment be unheeded? Can we turn a deaf ear to the distressful and despairing cry of so many victims to our national vice, whom a little money and a strong hand might, by such Retreats as those whose cause I plead to-day, transform from paupers to ratepapers, from drones to workers, from disease to health, and from misery to happiness?"

THE ENTRIES AT THE MEDICAL SCHOOLS.

BY the courtesy of the Deans, Wardens, and Secretaries of the undermentioned medical schools, we are enabled to publish the following list of students who have entered at the beginning of the present winter session. A refers to students entered for the full curriculum; B to students who enter to some special course; and C refers to dental students.

Schools.	A.	B.	C.
St. Bartholomew's	160	6	—
Charing Cross	38	4	2
St. George's	63	3	0
Guy's	81	—	3
King's College	56	—	—
St. Mary's	21	—	—
Middlesex	33	3	18
St. Thomas's	64	29	—
University College	106	41*	—
Westminster	20	3	—

* Students preparing for the Preliminary Scientific Examination for the degree of M.B. London University.

PRIZES IN THE MEDICAL SCHOOLS.

THE following are lists of the successful candidates for prizes in the Medical Schools during the session 1880-81.

ST. BARTHOLOMEW'S HOSPITAL.—Lawrence Scholarship and Gold Medal (not awarded); Brackenbury Medical Scholarship, G. F. Barnes; Brackenbury Surgical Scholarship, J. Harper; Senior Scholarship in Anatomy, Physiology, and Chemistry, T. W. Shore; Open Scholarships in Science, 1. J. Nall; 2. H. C. Chapman and S. K. Alcock (equal); Preliminary Scientific Exhibition, C. B. Innes; Jeaffreson Exhibition, R. Wrigley; Kirkes Gold Medal, W. P. Herringham; Bentley Prize, J. Berry; Hichens Prize, R. Orr; *Prox. acces.*, A. Shadwell; Wix Prize, J. R. Forrest; Harvey Prize, E. C. Pettifer; 2. A. M. Page; 3. E. J. Cave; 4. E. A. Opie and J. F. Steedman (equal); 6. A. Gresswell; 7. E. W. Willet; Practical Anatomy, Senior: Foster Prize, A. E. Hind; 2. H. C. C. Shaw; 3. J. F. Steedman; 4. J. N. Vogan; 5. E. J. Cave and R. De Morini (equal); 7. C. O'B. Harding and A. M. Page (equal); Practical Anatomy, Junior: Treasurer's Prize, J. C. Heath; 2. H. W. Chambers; 3. H. C. Chapman; 4. J. P. Fenoulhet and E. Jessop (equal); 6. N. W. Woods; 7. C. H. Upham; 8. G. P. Newbolt; 9. C. Kebbell; 10. J. Gay.

CHARING CROSS HOSPITAL.—Llewellyn Scholarship, James Donald. Governors' Clinical Gold Medal, W. B. C. Treasure; special certificate, G. Locke and S. Wyborn (equal); Pereira Prize, W. B. C. Treasure; special certificate, G. Locke and S. Wyborn (equal); Senior Anatomy: Silver Medal, C. L. Josling; Certificates, J. H. Crocker, G. H. Phillips, A. J. Turner, E. Atkins. Junior Anatomy: Bronze Medal, H. A. Sheppard; Certificates, A. R. Joliffe, J. McKno Ackland, A. Bowhay, A. D. Jollye. Senior Physiology: Silver Medal, J. H. Crocker; Certificates, E. J. G. Berkeley, E. Atkins. Junior Physiology: Bronze Medal, C. W. Ward and E. J. Norris (equal), Certificates, J. McKno Ackland, G. F. Hentsch, J. C. Smith. Chemistry: Silver Medal, G. R. Fletcher; Certificates, F. A. Saw, G. Morgan, A. R. Joliffe, J. C. Smith. Senior Medicine: Silver Medal, H. R. Hancock; Certificates, W. Tibbles, S. Wyborn. Junior Medicine: Bronze Medal, C. F. Clarke; Certificate, P. S. Oram. Senior Surgery: Silver Medal, J. Donald; Certificate, S. Wyborn. Junior Surgery: Bronze Medal, G. H. Phillips; Certificate, A. J. Turner. Botany: Silver

Medal, H. D'Arcy Power; Certificates, E. Atkins, C. F. Clarke, A. J. Turner. Materia Medica, E. Atkins; Certificate, G. H. Phillips. Midwifery: Silver Medal, W. Tibbles; Certificate, James Donald. Forensic Medicine: Silver Medal, W. B. C. Treasure and S. Wyborn (equal); Certificate, J. T. Tibbles. Pathology: Silver Medal, J. T. Tibbles; Certificate, S. Wyborn. Practical Chemistry: Silver Medal, E. J. G. Berkeley; Certificates, J. W. Nelham, A. W. Harris.

ST. GEORGE'S HOSPITAL.—*Summer Session.* Brackenbury Prize in Medicine, O. Giles; Brackenbury Prize in Surgery, W. Robinson; Proficiency Prizes: Third Year, A. Codd; Second Year, A. T. Tilly; First Year, H. Mead.—*Winter Session.* Henry Charles Johnson Memorial Prize, E. C. Arnold; Treasurer's Prize, O. Giles; Thompson Medal, W. V. Robinson; Sir Charles Clarke's Prize, A. Willis; William Brown £100 Exhibition, A. Sheild; William Brown £40 Exhibition, A. Shield.

GUY'S HOSPITAL.—*September*, 1880. Open Scholarship in Arts, R. M. Ward. Open Scholarship in Science, H. W. Pigeon. *October*, 1880: Gurney Hoare Prize, E. A. Starling. *March*, 1881: Michael Harris Prize, A. Martin. Treasurer's Gold Medal for Surgery, L. E. W. Stephens. Third Year's Students: First Prize, £35, Thomas Carr; Second Prize, £20, W. T. F. Davies; Certificates, W. T. Harris, J. O. Littlewood, and J. H. Booth. Second Year's Students: First Prize, £25, A. Martin; Second Prize, £10, A. E. Larking; Certificates, F. Heatherley, J. H. H. Manley, T. H. Miller, and A. G. Minns. First Year's Students: First Prize, £50, G. E. C. Anderson; Second Prize, £25, R. M. H. Randell; Certificates, A. H. Tubby, E. W. Phillips, and W. H. Bowes.

KING'S COLLEGE.—*Winter Session.* Medicine, Prize, G. L. Webster; Certificates, G. D. Porter, S. E. Craddock. Surgery, Prize, E. W. Benson; Certificates, W. Green, St. Clair Thomson, G. D. Porter. Anatomy, Prize, S. S. Merrifield; Certificates, W. S. Hayman, T. S. Short, C. P. Childe, C. D. Greenwood. Physiology, Prize, T. S. Short; Certificates, S. S. Merrifield, C. D. Greenwood, G. G. Hodgson. Chemistry, Prize, S. S. Merrifield; Certificates, G. G. Hodgson, J. F. Freeland. Comparative Anatomy, A. Carless. Clinical Medicine, G. L. Webster. Clinical Surgery (Professor Wood's), S. E. Craddock, Samuel Rabbeth; (Professor Lister's), St. Clair Thomson; Certificates, R. G. Lynam, R. H. Russell, Joseph Pollard.—*Summer Session.* Practical Physiology, Prize, R. C. Priestly; Certificate, R. S. Fairbank. Practical Chemistry, Prize, A. Carless; Certificates, A. W. Laing, H. B. Lavies. Botany, Prize, Albert Carless; Certificates, J. Wheatley, E. P. A. Marriette, A. F. Dimmock. Pathological Anatomy, Prize, H. R. Beevor; Certificate, H. Groom. Forensic Medicine, Prize, G. P. Porter; Certificates, C. D. Greenwood, G. Wall. Obstetric Medicine, Prize, H. Groom; Certificates, R. H. Russell, G. Wall. Materia Medica, Prize, S. S. Merrifield; Certificates, T. S. Short, G. T. Cheves. Tanner Prize, B. H. Stivens. Todd Clinical Prize, C. E. Goddard. Medical Clinical Prize, St. Clair Thomson; Certificate, J. E. Londen. Practical Biology, Prize, A. Carless; Certificates, E. P. A. Marriette, M. P. Holt, A. W. Laing.

LONDON HOSPITAL.—Clinical Medicine, £20 Scholarship, J. A. Williams; Certificates, D. P. Harris and G. Adkins. Clinical Surgery, £20 Scholarship, J. A. Williams. Clinical Obstetrics, £20 Scholarship, W. F. Dale; Certificate, J. A. Williams. Dressers' Prizes, £15 Prizes, R. H. Nicholson and F. H. Taylor; £10 Prize, W. Blaxland. Entrance Science Scholarships, £60 Scholarship, F. Hickens; £40 Scholarship, E. Bryceson. Buxton Scholarships, £30 Scholarship, S. Ashley; £20 Scholarship, H. G. Guinness. Duckworth Nelson Prize, J. A. Williams; Certificate, J. H. Russell. Human Anatomy, £20 Scholarship, G. H. Allden; Certificates, J. Thomas and J. J. Langston. Anatomy, Physiology, and Chemistry, £25 Scholarship, F. H. Taylor; Certificate, T. E. Gordon. Dissection Prizes, W. Blaxland, W. A. Nutt, J. S. Caskey.

ST. MARY'S HOSPITAL.—1880. Open Scholarship in Natural Science, A. P. Luff; second, J. H. Fisher. 1880-81. Scholarship in Pathology, W. Pearce; Scholarship in Anatomy, R. H. S. Spicer; Prosectors, C. H. Hale and A. T. Masters.—*Winter Session*, 1880-81. First Year, Anatomy and Histology, Prize, A. R. Hall; Certificates, T. B. Drew and A. P. Luff (Anatomy). Chemistry, Certificate, I. P. Shopoff. Second Year, Anatomy and Physiology, Prize, E. P. Cockey; Certificates, C. H. Hale and G. W. Hill; G. E. Hale and F. A. Rogers (Anatomy), K. U. Dutt (Physiology). Third Year, Medicine (no award). Surgery, Certificate, R. R. Hardwicke (disqualified for Prize) and J. R. Cater. Operative Surgery, Prize, J. R. Cater; Certificates, R. R. Hardwicke (disqualified for Prize) and A. H. Willoughby. Pathology, Certificates, R. S. Wright (disqualified for Prize) and W. F. Webster. Third and Fourth Year, Clinical Medicine, Prize, L. E. Wood; Certificates, H. E. Sieveking, P. P. Whitcombe, and R. C. Wright. Clinical Surgery, Prize, J. R. Cater; Certificate, F. Gotch.—*Summer Session.* Botany, no prize awarded; Certificates, P. A. Lloyd, W. R. N. Maloney. Practical Chemistry, Prize, A. R. Hall; Certificates, G. A. Pedley, F. F. White. Materia Medica, Prize, A. R. Hall; Certificates, A. P. Luff, H. Tanner. Midwifery, Prize, C. E. Hale; no Certificate awarded. Medical Jurisprudence, Prize, A. H. L. Stewart; Certificate, H. W. R. R. Crosse. Comparative Anatomy, Prize, A. H. L. Stewart.

MIDDLESEX HOSPITAL.—*October* 1880. Entrance Scholarships, 1. L. M. Guilding; 2. H. H. Kent. 1880-81. Broderip Scholarships, 1. J. H. Douty; 2. J. B. Sutton. Governors' Prize, J. B. Sutton. Clinical Prize, M. W. Russell. Medicine, Prize, G. Frost; Certificates, J. B. Sutton, J. H. Douty. Surgery, Prize, G. Frost; Certificates, J. B. Sutton, J. H. Douty, M. W. Russell. Pathological Anatomy, Prize, J. B. Sutton; Certificates, G. Frost, J. H. Douty, W. Hern, J. F. McMillan C. G. Brodie. Practical Surgery, Prize, H. J. Thornton; Certificates, W. Hern, W. H. Crago, P. W. B. Smith, P. B. Bentlif, A. W. Ogle, R. J. Bowker. Anatomy, Prize, W. H. Crago; Certificates, H. J. Thornton, A. W. Ogle, G. M. Braine, J. R. Roberts. Physiology, Prize, H. J. Thornton; Certificate, W. H. Crago. Chemistry (no award). Dissections, Prize, H. J. Thornton; Certificates, H. G. Nicholson, C. J. Deyns, J. G. D'Aguiar. Prosectors, Certificates, W. H. Crago, A. E. Flaxman, B.A., A. W. Ogle, J. O. Shemmonds, H. J. Thornton, W. E. Wynter. Midwifery, Prize, W. H. Crago; Certificates, E. H. Freeland, M. V. Stace. Forensic Medicine, Prize, W. H. Crago; Certificates, E. H. Freeland, M. V. Stace. Materia Medica, Prize, E. G. Foot; Certificates, Alfred Kirby, C. L. Hudson. Practical Chemistry, Prize, C. L. Hudson; Certificates, J. J. Andrews, J. S. Robertson, J. K. Frost, E. G. Foot. Botany, Prize, C. L. Hudson; Certificates, N. H. Forbes, L. M. Guilding, W. E. Newey, J. K. Frost, E. G. Foot, E. W. Paul, E. J. Penny. Practical Physiology, Prize, C. L. Hudson; Certificates, J. S. Robertson, W. E. Newey, E. J. Penny. Comparative Anatomy, Prize, H. J. Thornton; Certificate, W. H. Livermore. Psychological Medicine, Prize, H. J. Thornton; Certificates, W. H. Crago, M. Williams, G. M. Braine.

ST. THOMAS'S HOSPITAL.—*Winter Session*, 1880-81.—Entrance Science Scholarships, R. Lawson, £100 and Certificate; H. H. Lankester, £60 and Certificate. First Year's Students, R. Lawson, Tite Scholarship, £30, and Certificate; H. H. Lankester, £20 and Certificate; G. A. Carpenter, £10 and Certificate; S. Gregory and W. J. Maurice, Certificates. Second Year's Students, W. B. Tomson, Musgrove Scholarship, £42, and Certificate; C. D. Green, £20 and Certificate; F. F. Caiger, £10 and Certificate; A. E. Charpentier, R. Andrews, H. B. Robinson, Y. Saneyoshi, J. P. Glover, C. K. Bond, G. W. Ford, J. R. Keele, J. L. Cox, G. D. Johnston, Certificates. Third Year's Students, A. V. Bernays, £20 and Certificate; A. D. Roe, £15 and Certificate; W. J. Sheppard, £10 and Certificate. Anatomical Assistants, F. H. Furnival and W. J. Sheppard, Certificates. Prosectors, W. B. Tomson and G. W. Ford, Prizes and Certificates. Surgery and Surgical Anatomy, C. W. Haig Brown, Cheselden Medal. Practical Medicine, W. Wansbrough Jones, Mead Medal. Resident Accoucheurs, Hutton Castle, A. Newsholme, J. Shaw, and J. R. Lunn, Certificates. House-Physicians, H. P. Butler, G. S. Hatton, H. R. Hutton, and T. D. Acland, Certificates. Assistant House-Physicians, J. R. Lunn, T. D. Savill, G. S. Hatton, F. R. Walters, C. B. Richardson, H. Swale, J. B. Lawford, Certificates. House-Surgeons, J. R. Lunn, C. A. Ballance, H. P. Butler, and A. B. Carpenter, Certificates. Assistant House-Surgeons, F. R. Walters, C. B. Richardson, M. P. M. Collier, and H. Swale, Certificates. General Proficiency and Good Conduct, W. W. Jones, Treasurer's Gold Medal.—*Summer Session*—First Year: First Prize, £15, G. A. Carpenter; Second Prize, £10, R. Lawson; Third Prize, £5, G. S. Sims; Certificates, J. B. Smith, O. F. Frohwein, and H. Bedwell. Second Year: First Prize, £15, H. B. Robinson.

UNIVERSITY COLLEGE.—*Winter Session.*—Anatomy: Gold Medal, E. Hudson. First Silver Medal, A. J. Turner; Second Silver Medal, W. A. Gostling and T. F. Gardner (equal). Certificates, 5. *R. H. Marten; Second Class, H. Littlewood, H. H. Wigg, T. Wilson; Third Class, A. F. Blagg, R. E. Duke, J. J. Powell, H. Williamson. Junior Class: Silver Medal, J. W. Carr. Certificates, 2. *P. Flemming; 3. *L. Barnett; 4. *J. H. E. Brock. Second Class, F. C. H. Smith, W. Washbourne; Third Class, J. R. Adie, C. Andrews, H. Armstrong, C. Bohrsmann, H. D. Buss, S. L. Deeble, J. B. Fowler, W. A. B. McCabe, E. K. O'Connor, J. Pearson, P. D. Turner, J. W. Yeats. Physiology: Gold Medal, W. A. Gostling; First Silver Medal, J. H. E. Brock; Second Silver Medal, A. J. Turner. Certificates, Second Class, H. R. Spencer; Third Class, W. H. Brown, T. F. Gardner, J. E. Jeffris, A. King, H. Littlewood, J. J. Powell; Fourth Class, R. Hill. Junior Class: Silver Medal, P. Flemming. Certificates, 2. *S. C. Jones; 3. *E. H. Thane; 4. *J. W. Carr; 5. *R. F. Bowie; Second Class, H. Armstrong, L. Barnett, W. T. Cocking, Joseph Taylor; Third Class, J. R. Adie, A. G. M. Creagh, F. W. Day, S. L. Deeble, W. G. Earle, W. M. Ellis, E. B. Holland, A. Lawrence, P. D. Turner, A. F. Voelcker, H. S. Walker, H. J. Webb, F. White. Chemistry: Gold Medal, P. Mukerji; First Silver Medal, J. W. Carr; Second Silver Medal, J. R Bradford. Certificates, 4. *E. H. Thane; 5. *F. Moul; 6. *E. G. Stocker; 7. *J. J. Quelch; Second Class, J. R. Adie, W. G. Earle, W. P. May, O. C. J. G. L. Overbeck, C. E. Sunder, J. W. Yeats; Third Class, C. Andrews, H. W. Fox, E. E. Graves, A. G. Green, W. A. B. McCabe, H. S. Walker. Medicine: Gold Medal, W. C. Wilkinson; First Silver Medal, S. H. C. Martin and C. Stonham (equal). Certificates, 4. *F. J. Bollen, C. J. Pike, and E. W. von Tunzelmann (equal); Second Class, R. Boxall, J. W. Draper, F. J. Lea, W. H. Tomlins; Third Class, G. W. Collins, E. Skipper, P. Vincent. Surgery: Gold Medal, C. Stonham; First Silver Medal, C. J. Pike; Second Silver Medal, E. W. von Tunzelmann. Certificates, Second Class, E. Laurent; Third Class, J. W. Draper, E. Skipper, P. Vincent; Fourth Class, M. J. Khan. Zoology and Comparative Anatomy: Gold Medal, A. E. Tovey; Silver Medal, W. M. Bayliss. Certificates, 3. *W. B. S. Benham; 4. *J. J. Quelch; Second Class, J. R. Bradford, E. F. Bright, H. S. Green; Third Class, E. L. de Chazal, J. Hamel, T. M. Porter, E. G. Stocker; Fourth Class, C. P. Crouch, C. E. Sunder, J. Yeomans. Clinical Medicine: Fellows Medals: Gold Medal, C. Stonham; Silver Medal, E. Laurent and C. J. Pike (equal). Certificates, 4. *C. D. A. Collings; 5. *H. W. Newsholme; 6. *George Sergeant. Junior Class: Silver Medal, S. H. C. Martin. Certificates, 2. *C. O. Fowler and W. D. Halliburton (equal); 4. *P. F. Moline; 5. *E. Skipper, E. T. Thring and H. D. Waugh (equal); 8. *J. W. Walker; 9. *A. H. Cook and W. C. Wilkinson (equal); 11. *J. R. Day, A. H. N. Lewers, and F. H. Lane (equal); 14. *C. R. Elgood; 15 *M. E. Dovaston and E. W. von Tunzelmann (equal); 17. *F. Knight and E. A. Dingley (equal); 19. *F. J. Bollen; Second Class, J. W. Draper; Third Class, H. Downes, W. P. Graham, W. H. Tomlins; Fourth Class, J. F. Lea, L. R. W. Leeming.—*Summer Session.* Materia Medica: Gold Medal, W. A. Gostling; First Silver Medal, J. H. E. Brock; Second Silver Medal, P. Flemming. Certificates, 4. *H. W. Pilgrim; 5. *A. F. Blagg and J. J. Powell (equal); Second Class, H. P. Birch, Harry Littlewood, H. R. Spencer; Third Class, R. Boxall, E. O. Croft, W. H. Evans, Frank Hinds, G. V. Perez, A. J. Turner, T. Wilson. Botany: Second Class, E. F. Bright; Third Class, J. R. Bradford, H. J Webb. Practical Chemistry: Senior Class, Gold Medal, J. H. E. Brock; First Silver Medal, Lawrence Barnett; Second Silver Medal, A. J. Turner. Certificates, 4. *W. T. Cocking; Second Class, J. R. Adie, C. J. Arkle, C. Bohrsmann, J. W. Carr, P. Flemming, W. A. B. M'Cabe, G. V. Perez, J. J. Powell; Third Class, C. Andrews, H. R. Spencer, E. H. Thane. Junior Class: Gold Medal, A. G. Green; First Silver Medal, J. J. Weaver; Second Silver Medal, H. S. Green. Certificates, 4. *J. R. Bradford; 5. *W. Washbourne; 6. *W. G. Earle; 7. *F. J. Butt; 8. *T. H. Beare; 9. *H. Bonnefin; Second Class, W. M. Abbott-Anderson, E. F. Bright, A. W. Burrell, E. L. de Chazal, H. F. Cleveland, F. W. Gee, A. M. Joly, F. Moul; Third Class, H. D. Buss, J. Hamel, W. Lees, J. N. Lewis, N. M'Gillicuddy, J. P. Nassau, C. E. Sunder, J. Yeomans. Midwifery: Senior Class, Gold Medal, Robert Boxall; Silver Medal, E. T. Thring. Certificates, 3. *E. Hudson; 4. *F. J. Lea; 5. *M. R. Gooding; 6. *W. H. Tomlins; Second Class, W. T. Barnes, J. W. Draper; Third Class, G. H. Fink, C. O. Fowler. Junior Class: Silver Medal, W. A. Gostling. Certificates, 2. *T. F. Gardner; 3. *W. C. Wilkinson; 4. *A. F. Blagg; 5. *T. P. Gostling; 6. *H. Littlewood; Second Class, J. R. Barefoot, S. N. Cardozo; Third Class, Rowland Hill. Medical Jurisprudence: Gold Medal, W. D. Halliburton; Silver Medal, C. O. Fowler; Second Class, J. R. Barefoot, T. F. Gardner, E. W. von Tunzelmann; Third Class, J. W. Draper, F. J. Lea. Pathological Anatomy: Filliter Exhibition, £30, S. H. C. Martin; Silver Medals, W. D. Halliburton and E. W. von Tunzelmann (equal); Third Class, Robert Boxall. Practical Physiology: Third Class, Francis White. Ophthalmic Medicine and Surgery: Silver Medal, W. C. Wilkinson; Third Class, C. R. Bamford. Hygiene: Silver Medal and Prize, B. A. Whitelegge; Second Class, W. Fraser; Third Class, T. H. Brockell. Clinical Medicine: Junior Class, Prize, M. R. Gooding and H. Littlewood (equal). Certificates, 3. *T. P. Gostling and G. F. Phillpot (equal); Second Class, F. J. F. Culhane, T. F. Gardner, Ernest Hud-

son, R. W. Watson; Third Class, F. E. Pearse.—* Obtained number of marks qualifying for a prize.

WESTMINSTER HOSPITAL.—*Winter Session.*—Fence Entrance Exhibition, £50 *per annum*, G. Gresswell. Exhibition for First Winter Subjects: W. Weaver. Scholarship for Second-year Subjects: P. R. Mander. Frederic Bird Medal and Prize: J. W. Batterham. Chadwick Prize: C. H. Wise. Dr. Murrell's Prize for Histology: C. S. Humphreys. Clinical Surgery: A. de C. Scanlan. Class Certificates—Anatomy: Senior Class, H. Larder; P. R. Mander and C. Waller (equal); R. Caldwell; C. S. Humphreys and W. Urwick (equal); J. Swain and H. W. Hart (equal); Junior Class, G. C. Macdonald, W. Weaver, C. Davidson, J. D. Staples. Physiology: Senior, H. Larder, P. R. Mander; Junior, G. Cresswell, J. T. Boyd, W. A. Wills, and W. Weaver. Chemistry: G. Cresswell, W. Weaver, W. A. Wills, and R. E. Genge. Medicine: C. H. Wise and J. H. P. Walsh. Surgery: C. H. Wise, J. H. P. Walsh, and A. de C. Scanlan. Histology (3rd Stage), C. S. Humphreys, P. R. Mander, P. Jackson, P. C. Kempster, W Urwick, H. Larder.—*Summer Session*—Botany: J. Swain, Prize and Certificate; W. A. Wills, Certificate. Practical Chemistry: W. Weaver, Prize and Certificate. Forensic Medicine. H. Larder, Prize and Certificate. Midwifery: H. Larder, Prize and Certificate. Anatomy (Juuior): 1. C. R. Davidson and G. Macdonald (equal), Prize; 3. J. D. Staples, S. Wright, and R. Courteen, Certificates. Materia Medica: W. Weaver, Prize and Certificate; H. W. Hart, Certificate.

QUEEN'S COLLEGE, BIRMINGHAM.—Medicine: Medal and First Certificate, F. L. Phillips; Second Certificate, A. T. Holdsworth. Surgery: Medal and First Certificate, H. L. Swinson; Second Certificate (not awarded). Pathology: Medal and First Certificate, A. T. Holdsworth; Second Certificate (not awarded). Anatomy: Senior Division, Medal and First Certificate, C. J. Evers; Second Certificate, E. D. Vinrace. Junior Division, Medal and First Certificate, C. E. Purslow; Second Certificates, G. H. Melson, A. F. Messiter (equal). Practical Anatomy: Senior Division, Medal and First Certificate, C. J. Evers; Second Certificate, J. D. Price. Junior Division, Medal and First Certificate, C. E. Purslow; Second Certificate, A. F. Messiter. Physiology: Medals and First Certificates, C. J. Evers, J. D. Price (equal); Second Certificate, A. W. Scott. Practical Physiology: Medal and First Certificate, J. D. Price; Second Certificate, A. W. Scott. Chemistry: Medals and First Certificates, C. E. Purslow, G. H. Melson (equal): Second Certificate, J. B. Wall. Botany: Medals and First Certificates, C. E. Purslow, G. H. Melson (equal). Materia Medica: Medal and First Certificate, W. Aston; Second Certificate, G. H. Melson. Forensic Medicine: Medal and First Certificate, F. L. Phillips; Second Certificate, C. J. Evers. Midwifery: Medal and First Certificate, F. L. Phillips; Second Certificate, J. D. Price. Practical Chemistry: Medals and First Certificates, W. Aston, T. Young (equal); Second Certificates, J. W. Crowther, — Richards (equal). Sands Cox Prize: A. T. Holdsworth. Ingleby Scholarship: F. L. Phillips.

LEEDS SCHOOL OF MEDICINE.—Hardwick Prize, J. W. H. Brown. Surgeon's Prize, J. W. H. Brown. Medicine, Prize, J. W. H. Brown; Certificate, F. J. Burman. Surgery, Medal, T. H. Smith; Certificate, J. W. H. Brown. Anatomy (senior), Medal, H. Child; Certificates, E. Beaumont and H. J. Robson. Anatomy (junior), Medal, R. P. Halliday; Lecturer's Prize, E. G. Morris. Physiology, Medal and Lecturer's Prize, H. Child; Certificate, E. Beaumont. Forensic Medicine, Thorp Prize, first award, W. Spencer; second award, J. H. Naylor. Practical Physiology, Medal, A. H. Barstow; Certificate E. R. F. Mason. Pathology, Prize, W. J. Waddington. Botany, Medal, G. H. Oliver; Certificate, G. S. Greenwood. Chemistry, Medal, O. Scattergood; Certificate, R. W. Green. Practical Chemistry, Medal, H. C. Baldwin; Certificate, G. H. Scott. Midwifery, Medal, H. Child; Certificate, H. J. Robson. Materia Medica, Medal, H. Child; Certificate, H. C. Baldwin

LIVERPOOL ROYAL INFIRMARY SCHOOL OF MEDICINE.—Lyon Jones Scholarships, F. C. Larkin, A. Barron, J. W. Ellis, and A. H. Wilson.—*Winter Session.* Third Year Subjects (Medicine, Surgery, and Pathology), Silver Medals, Joseph and R. Williams (equal). Second Year Subjects (Advanced Anatomy and Physiology), Torr Gold Medal, W. O. Travis; Bronze Medal, F. C. Larkin; Certificates, — Dawson, H. A. Bredin (equal). First Year Subjects (Elementary Anatomy and Physiology, and Chemistry), Bligh Gold Medal, McLoughlin; Bronze Medal, Lewis; Certificates, 1. Collins; 2. Wild. Histological Prizes, W. O. Travis, F. C. Larkin, — Robinson.

OWENS COLLEGE.—Turner Scholarship, £25 (no competition). Dumville Surgical Prize, £20, T. Harris; *Prox. acc.* J. Hayes. Platt Physiological Exhibitions, £20 each, Second Year, W. Thorburn, B.Sc.; First Year (not awarded). Dauntesey Entrance Scholarship, £100, O. J. Kauffmann. Class Prizes, Third Year: Medicine, J. M. Beverley; Midwifery, J. M. Beverley; Pathology and Morbid Anatomy, C. Challinor; Medical Jurisprudence, J. M. Beverley and J. Collier; Hygiene, J. Collier; Practical Surgery, G. Preston; Ophthalmology, J. Collier and G. Preston. Second Year: Anatomy, R. Jennings; Physiology, W. Thorburn, B.Sc.; Surgery, W. Thorburn, B.Sc.; Materia Medica, W. J. Black; Practical Physiology, O. S. Fisher. First Year: Anatomy, W. H. Brazil and C. S. Earle; Physiology, H. C. Bowman and O. J. Kauffmann; Practical Chemistry, E. Somers.

UNIVERSITY COLLEGE OF BRISTOL: MEDICAL SCHOOL. — *Summer Session.* Botany, Prize, L. K. Rankin; Certificates, J. E. Jefferis, L. Vassal, F. W. Weir, H. C. Thurston, W. J. T. Barker. Practical Chemistry, Certificates, W. J. T. Barker, W. Basset, H. H. Tomkins, F. W. Weir, W. C. Lysaght, H. C. Thurston. Practical Physiology and Histology, Prize, W. J. T. Barker; Certificates, H. H. Tomkins, J. E. Jefferis, F. W. Weir, H. W. Windsor-Aubrey, R. S. Coulthard, W. C. Lysaght, H. C. Thurston. Materia Medica and Therapeutics, Prize, W. A. Jones; Lecturer's Prize, W. C. Lysaght; Certificates, H. W. Windsor-Aubrey, F. W. Weir, R. S. Coulthard, H. H. Tomkins, W. Basset, H. C. Thurston, L. Vassall, E. M. Meaden. Obstetric Medicine, Prize, J. Jenkins; Certificate, H. T. Rudge. Operative and Practical Surgery, Prize, J. P. Myles; Certificate, H. T. Rudge.—*Winter Session.* Anatomy and Physiology (Junior Class), Prize, A. N. Littie; Lecturer's Prize, P. W. Williams. Certificate in Junior Class of Anatomy, H. J. Capron; Certificates in Junior Class of Physiology, W. G. Thorold, H. J. Capron, L. K. Rankin, A. M. Gray, W. Basset. Senior Anatomy, Prize, H. C. Thurston; Certificates, H. H. Tomkins, H. Simmons, E. A. Hughes, H. W. Windsor-Aubrey, R. S. Coulthard, and W. C. Lysaght (equal), W. A. Jones, W. J. T. Barker, F. W. Weir. Senior Physiology, Prize, W. J. T. Barker; Certificates, H. H. Tomkins, H. W. Windsor Aubrey, W. C. Lysaght, R. S. Coulthard, H. Simmons, W. A. Jones, H. C. Thurston, E. A. Hughes, F. W. Weir. Practical Anatomy, Prize, H. W. Windsor-Aubrey. Prosector's Certificates, R. S. Coulthard, W. C. Lysaght, H. H. Tomkins, F. W. Weir (equal). Chemistry, Prize, A. N. Little; Certificates, A. J. Gibbons, F. J. Wethered, W. H. Stevens, W. Basset, W. G. Thorold, A. M. Gray. Surgery, Prize, L. E. A. Salmon.—ROYAL INFIRMARY. Pathological Prizes, J. P. Myles and F. Tratman (equal); Suple's Medical Prize, J. P. Bush; Clarke's Prize, L. E. A. Salmon.—GENERAL HOSPITAL. Martyn Memorial Entrance Scholarship, A. N. Little; Clarke Scholarship, H. T. Rudge; Lady Haberfield Prize, I. Kiddle.

UNIVERSITY OF DURHAM COLLEGE OF MEDICINE, NEWCASTLE-ON-TYNE. Tulloch Scholarship, Isaac Hartley; Charlton Scholarship, William Robinson; Gibb Scholarship, W. Robinson; Dickinson Scholarship, with Gold Medal added, W. Robinson. *Winter Session*, 1880-81. Anatomy (Senior Class): Medal and First Certificate, J. Hartley; Certificates, 2. A. Bourne: 3. F. E. Abbott; (Junior Class): Medal and First Certificate, J. L. Reveley; Certificates, 2. W. H. Wigham; 3. G. R. Hall. Dissections: Medal and First Certificate, A. Hepworth. Physiology (Senior Class): Medal and First Certificate, A. Hepworth; Certificates, 2. J. A. Hutchinson; 3. J. Hartley; 4. F. F. Abbott and C. A. Wigan (equal); (Junior Class): Medal and First Certificate, J. L. Reveley; Certificates, 2. H. B. W. Plummer; 3. T. Clifford; 4. J. Lazenby. Medicine: Medal and First Certificate, W. Robinson; Certificates, 2. J. Foggin; 3. E. L. Prowde. Surgery: Medal and First Certificate, W. Robinson; Certificates, 2. C. H. C. Milburn; 3. J. Waldy. Public Health: Medal and First Certificate, C. H. C. Milburn; Second Certificate, W. Robinson.—*Summer Session.* Botany: Medal and First Certificate, William Jacques; Second Certificate, J. Lazenby. Materia Medica: Medal and First Certificate, William Jacques. Practical Physiology: Medal and First Certificate, W. H. Wigham; Second Certicate, T. Harling and W. Slater (equal). Practical Shemistry: Medal and First Certificate, W. Jacques; Second Certificate, J. Lazenby. Therapeutics: Medal and First Certificate, A. Hepworth. Medical Jurisprudence: Medal and First Certificate, A. Hepworth. Pathology: Medal and First Certificate, Charles S. Blair.

GLASGOW ROYAL INFIRMARY SCHOOL OF MEDICINE.—*Winter Session*, 1880-81. Chemistry: Class Prize, W. Jones. Chemical Division: Prize, H. B. Melville. Medical Division: Prize, M. S. Wade; Certificate, J. H. Owen. Anatomy—Senior Division: First Prize, J. W. White; Second Prize, A. Tunstall; Certificates, H. C. Leng, W. Morris, J. Hunter, J. Amy, W. Middleton, H. J. Roberts. Junior Division: First Prize, A. Moon; Second Prize, D. Nairn; Certificates, E. Coyle, R. D. Morgan, A. C. Boothman. Practical Anatomy—Senior Division: Certificates, W. A. Algie, J. Amy, J. Hunter, H. C. Leng, W. Middleton, W. Morris, R. Price, H. J. Roberts, A. E. Tunstall, J. W. White. Junior Division: Certificates, J. C. Clark, S. P. Clark, R. D. Morgan, J. A. Moon, D. Nairn, T. Scholes, J. Swanson. Class Prosectors, J. W. White and P. F. Jardine. Physiology: First Prize, J. Hunter; Second Prize, J. W. White; Certificate, J. A. Moon. Surgery: First Prize, C. S. Young and J. W. White (equal); Second Prize, T. H. Williams; Third Prize, G. D. Moon and T. B. M'Farlane (equal); Certificates, J. Gillies, J. G. Anderson. Practice of Medicine: First Prize, C. S. Young; Second Prize, T. H. Williams; Third Prize, G. D. Moon. Clinical Class: First Prize, C. S. Young; Second Prize, T. H. Williams; Third Prize, P. F. Jardine. Materia Medica: First Prize, G. D. Moon; Second Prize, T. H. Williams; Certificates, C. S. Young, J. W. Owen, J. Gillies.

CARMICHAEL COLLEGE OF MEDICINE AND SURGERY.—Carmichael Scholarship, T. E. Cahill; Extra Prize (£5), P. de B. Skerrett. Senior Class Prizes: 1. P. de B. Skerrett; 2. M. J. Treston. Second Year's Class Prizes: 1. J. T. Bolger and E. D. Mullan (equal); 3. C. Wynne. Junior Class Prizes: R. H. Clement and J. O'Hara (equal); Extra, F. S. Heuston and W. H. B. Robinson (equal). Special Prizes: Chemistry, J. Meenan and H. W. Smart (equal). Medicine, G. Macartney. Midwifery, G. N. Wynne; Extra, G. Macartney. Ophthalmic Surgery, G. A. Walpole. Botany, G. N. Wynne; Extra, W. H. B. Robinson. Materia Medica, J. K. Irwin; Extra, G. N. Wynne. Medical Jurisprudence, T. C. Moore; Extra, W. H. Waterfield. Practical Chemistry, W. H. B. Robinson. Practical Histology, J. T. Bolger and F. S. Heuston (equal). Mayne Scholarship: J. T. Bolger; Extra Prize (£5), P. de B. Skerrett.

ACTION OF LONDON AIR ON PUBLIC BUILDINGS.—The magnesian limestone of many public buildings is suffering slow disintegration. The surveyor of Marylebone lately submitted to Mr. Winter Blyth some of the dark brown to black efflorescence obtained from the tower of Christ Church. The substance was light, porous, dark in colour, and friable. On heating in a small tube, closed at one end, tarry matters were evolved, and a strongly acid liquid distilled. An analysis of the incrustation showed the following composition: water and tarry volatile matters, 14.6 per cent.; organic matter, 18.0; sulphate of lime, 22.5; sulphate of magnesia, 27.4; silica, 10.6; chlorine, 2.5; iron and alumina oxides, 4.4. On examining the powder by the microscope, a vegetable growth, consisting of minute cells, containing chlorophyll, was discovered. It would then appear that the magnesian limestone, which is mainly composed of insoluble carbonates of magnesia and lime, on exposure to the air becomes here and there covered by a minute growth of lichens. But the sulphuric acid present in London air and London smoke converts the carbonates very gradually into sulphates, which appear as an efflorescence on the surface of the stone, and, by its roughened porous structure, affords a nidus for soot and dust. Mr. Blyth observes that the amount of stone that in one year could thus be made soluble and washed to earth may be insignificant, but the process is continuous night and day, and, similar to the slow silent geological disintegration of rocks, performs enormous degradations in the course of a number of years; in time, Christ Church might be almost entirely changed into soluble purgative salts.